

HEALTH QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2021 OF THE CONDITION AND AFFAIRS OF THE

Reliance HMO, Inc.

NAIC	Group Code 0000		pany Code <u>16542</u> Employer's ID	Number 81-4977640
Organized under the Laws of	(Current) (Pri Michig a	•	, State of Domicile or Port of En	try MI
Country of Domicile		United	States of America	
Licensed as business type:		Health Mai	ntenance Organization	
Is HMO Federally Qualified? Ye	s[X]No[]			
Incorporated/Organized	01/13/2017		Commenced Business	03/01/2019
Statutory Home Office	23900 Orchard Lake Ro	I Suite 200	Farmi	ngton Hills, MI, US 48336-2512
	(Street and Num			own, State, Country and Zip Code)
Main Administrative Office		23900 Orch	ard Lake Rd Suite 200	
Farmin	gton Hills, MI, US 48336-2512		eet and Number)	248-715-5400
	wn, State, Country and Zip Coo			a Code) (Telephone Number)
Mail Address	23900 Orchard Lake Rd Suit	e 200	,Farmi	ngton Hills, MI, US 48336-2512
	(Street and Number or P.O.	Box)	(City or T	own, State, Country and Zip Code)
Primary Location of Books and R	ecords		hard Lake Rd Suite 200	
Farmin	gton Hills, MI, US 48336-2512	(Stre	eet and Number)	248-715-5400
(City or To	wn, State, Country and Zip Coo	le)	(Are	a Code) (Telephone Number)
Internet Website Address		https://www.relia	ncemedicareadvantage.org/	
Statutory Statement Contact	Jeffrey Alar	n Neuburger	,,	248-715-5411
ine	(Na uburger@relianceaco.org	ame)		(Area Code) (Telephone Number) 248-715-5415
jiic	(E-mail Address)			(FAX Number)
			OFFICERS	
	Nazmul NMN Ha		Secretary/Treasurer	Neil James Belgiano DO
President	Gene Avron Fa	arber		
			OTHER	
			RS OR TRUSTEES	
Nazmul NMN F Neil James Be		Monamed	Sayeedur Siddique MD	Gene Avron Farber
State of	Michigan Oakland	— ss:		
County of	Oakialiu			
all of the herein described asset statement, together with related a condition and affairs of the said in in accordance with the NAIC Ani rules or regulations require diffi respectively. Furthermore, the si	s were the absolute property of exhibits, schedules and explana eporting entity as of the reportinual Statement Instructions and erences in reporting not related to pe of this attestation by the company of the second services are services as the second second services are services as the second s	f the said reporting tions therein contain g period stated about Accounting Praction at to accounting p described officers a	entity, free and clear from any liens of ned, annexed or referred to, is a full and ove, and of its income and deductions the ces and Procedures manual except to foractices and procedures, according the list includes the related corresponding	ting entity, and that on the reporting period stated above or claims thereon, except as herein stated, and that thi d true statement of all the assets and liabilities and of the therefrom for the period ended, and have been complete the extent that: (1) state law may differ; or, (2) that state to the best of their information, knowledge and belief electronic filing with the NAIC, when required, that is at e requested by various regulators in lieu of or in additional transfer of the state of the
Gene Avron Farb President	er		umes Belgiano, DO retary/Treasurer	Nazmul NMN Haque, MD Chief Executive Officer
Subscribed and sworn to before r	ne this			

3. Number of pages attached.....

ASSETS

			Current Statement Date		4
		1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1	Bonds	7.00010	Trondamitod / 1000to	0	1.463.804
١.					1,400,004
2.	Stocks:			0	0
	2.1 Preferred stocks				_
	2.2 Common stocks			0	0
3.	Mortgage loans on real estate:				
	3.1 First liens				0
	3.2 Other than first liens			0	0
4.	Real estate:				
	4.1 Properties occupied by the company (less \$				
	encumbrances)			0	0
	4.2 Properties held for the production of income (less				
	\$ encumbrances)			0	0
	4.3 Properties held for sale (less \$				
	encumbrances)			0	0
	*			0	0
5.	Cash (\$2,012,117), cash equivalents				
	(\$2,798,844) and short-term				
	investments (\$	4,810,961		4,810,961	1,845,169
6.	Contract loans (including \$ premium notes)			0	0
7.	Derivatives			0	0
8.	Other invested assets				0
9.	Receivables for securities				
-	Securities lending reinvested collateral assets				
10.					
11.	Aggregate write-ins for invested assets				
12.	Subtotals, cash and invested assets (Lines 1 to 11)	4,810,961	0	4,810,961	3,339,115
13.	Title plants less \$ charged off (for Title insurers				
	only)				0
14.	Investment income due and accrued			0	0
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection			0	0
	15.2 Deferred premiums, agents' balances and installments booked but				
	deferred and not yet due (including \$				
	earned but unbilled premiums)			0	0
	15.3 Accrued retrospective premiums (\$				
	contracts subject to redetermination (\$	EO 101		E0 101	100 000
4.0					130,900
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers				255,322
	16.2 Funds held by or deposited with reinsured companies			0	0
	16.3 Other amounts receivable under reinsurance contracts			0	0
17.	Amounts receivable relating to uninsured plans			0	154,794
18.1	Current federal and foreign income tax recoverable and interest thereon			0	0
18.2	Net deferred tax asset			0	0
19.	Guaranty funds receivable or on deposit			0	0
20.	Electronic data processing equipment and software			0	0
21.	Furniture and equipment, including health care delivery assets				
- ' '	(\$			0	0
20	· ·			0	0
22.	Net adjustment in assets and liabilities due to foreign exchange rates				
23.	Receivables from parent, subsidiaries and affiliates				0
24.	Health care (\$) and other amounts receivable				0
25.	Aggregate write-ins for other than invested assets	0	0	0	1
26.	Total assets excluding Separate Accounts, Segregated Accounts and	E 00E 440	0	F 00F 440	0.000.400
	Protected Cell Accounts (Lines 12 to 25)			5,000,440	3,000,132
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28.	Total (Lines 26 and 27)	5,065,440	0	5,065,440	3,880,132
20.	·	3,003,440		3,003,440	0,000,102
	DETAILS OF WRITE-INS				
1101.					
1102.					
1103.					
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199.	Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501.	Rounding			0	1
2502.					
2503.	0				^
2598.	Summary of remaining write-ins for Line 25 from overflow page			0	0
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	0	0	0	1

LIABILITIES, CAPITAL AND SURPLUS

1	LIABILITIES, CAP		Current Period		Prior Year
		1	2	_ 3	4
		Covered	Uncovered	Total	Total
1.	Claims unpaid (less \$ reinsurance ceded)	186,202			
2.	Accrued medical incentive pool and bonus amounts				0
3.	Unpaid claims adjustment expenses			0	0
4.	Aggregate health policy reserves, including the liability of				
	\$0 for medical loss ratio rebate per the Public				
	Health Service Act	1,038,540		1,038,540	4, 154, 160
5.	Aggregate life policy reserves			0	0
6.	Property/casualty unearned premium reserve			0	0
7.	Aggregate health claim reserves	1,174,000		1,174,000	0
8.	Premiums received in advance			0	0
9.	General expenses due or accrued	721,517		721,517	1,149,390
10.1	Current federal and foreign income tax payable and interest thereon				
	(including \$ on realized gains (losses))			0	0
10.2	Net deferred tax liability				0
11.	Ceded reinsurance premiums payable				
12.	Amounts withheld or retained for the account of others				
13.	Remittances and items not allocated				
14.	Borrowed money (including \$ current) and	•			
14.	interest thereon \$ (including				
	· -			0	107 500
45	\$ current) Amounts due to parent, subsidiaries and affiliates				
15.	·				
16.	Derivatives				
17.	Payable for securities				
18.	Payable for securities lending			0	0
19.	Funds held under reinsurance treaties (with \$				
	authorized reinsurers, \$ unauthorized				
	reinsurers and \$ certified reinsurers)			0	0
20.	Reinsurance in unauthorized and certified (\$				
	companies				0
21.	Net adjustments in assets and liabilities due to foreign exchange rates	•		0	0
22.	Liability for amounts held under uninsured plans			0	0
23.	Aggregate write-ins for other liabilities (including \$				
	current)	0	0	0	0
24.	Total liabilities (Lines 1 to 23)	3,220,259	0	3,220,259	6,437,385
25.	Aggregate write-ins for special surplus funds				9,396
26.	Common capital stock		XXX	12,380,000	8,000,000
27.	Preferred capital stock				
28.	Gross paid in and contributed surplus				
29.	Surplus notes				
30.	Aggregate write-ins for other than special surplus funds			_	0
31.	Unassigned funds (surplus)			(10,534,819)	
32.	Less treasury stock, at cost:			(10,004,010)	(10,300,043
32.	•				
	32.1shares common (value included in Line 26	VVV	XXX		
	\$	XXX			
	32.2 shares preferred (value included in Line 27				
	\$				
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)			1,845,181	
34.	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	5,065,440	3,880,132
	DETAILS OF WRITE-INS				
2301.					
2302.					
2303.					
2398.	Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399.	Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	0	0	0	0
2501.	Unrealized Gain	xxx	XXX		9,396
2502.					
2503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page				0
2596. 2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	0	9,396
				-	·
3001.			XXX		
3002.					
3003.					
3098.	Summary of remaining write-ins for Line 30 from overflow page				0
3099.	Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

			ND EXPER	Prior Year To Date	Prior Year Ended December 31
		1 Uncovered	2 Total	3 Total	4 Total
1.	Member Months	XXX			5, 197
2.	Net premium income (including \$ non-health		,	,	,
	premium income)	xxx	6,881,374	3,903,894	5, 132, 427
3.	Change in unearned premium reserves and reserve for rate credits	xxx			
4.	Fee-for-service (net of \$ medical expenses)	XXX	1,395		896
5.	Risk revenue	XXX			
6.	Aggregate write-ins for other health care related revenues	XXX	0	68,731	0
7.	Aggregate write-ins for other non-health revenues	XXX	211,124	0	0
8.	Total revenues (Lines 2 to 7)	XXX	7,093,893	3,972,625	5, 133, 323
	Hospital and Medical:				
9.	Hospital/medical benefits		4,141,019	2, 192, 022	3, 196, 728
10.	Other professional services		136,845	395,098	475,869
11.	Outside referrals				
12.	Emergency room and out-of-area				
13.	Prescription drugs		2,393,648	803,981	1,213,942
14.	Aggregate write-ins for other hospital and medical		0	0	0
15.	Incentive pool, withhold adjustments and bonus amounts				
16.	Subtotal (Lines 9 to 15)		06,671,512	3,391,101	4,886,539
	Less:				
17.	Net reinsurance recoveries				,
18.	Total hospital and medical (Lines 16 minus 17)		06,671,512	3,391,101	4,631,217
19.	Non-health claims (net)				
20.	Claims adjustment expenses, including \$ cost				
	containment expenses			567,988	1,576,624
21.	General administrative expenses		2,236,729	1,573,367	2,660,027
22.	Increase in reserves for life and accident and health contracts				
	(including \$ increase in reserves for life only)				
23.	Total underwriting deductions (Lines 18 through 22)				13,022,028
24.	Net underwriting gain or (loss) (Lines 8 minus 23)	XXX			(7,888,705)
25.	Net investment income earned		25,885	29,596	39,246
26.	Net realized capital gains (losses) less capital gains tax of				
	\$				(84)
27.	Net investment gains (losses) (Lines 25 plus 26)		025,885	29,596	39 , 162
28.	Net gain or (loss) from agents' or premium balances charged off [(amount				
	recovered \$)				
	(amount charged off \$)])]			ļ	
29.	Aggregate write-ins for other income or expenses		0(37,444	0	0
30.	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	xxx	46.560	(2,730,235)	(7.849.543)
31.	Federal and foreign income taxes incurred				
32.	Net income (loss) (Lines 30 minus 31)	XXX	46,560	(2,730,235)	(7,849,543)
02.	DETAILS OF WRITE-INS	7001	13,552	(=,::::,=::)	(1,12,12,12,12)
0601.	Pharmacy Rebate Revenue	YYY		68.731	
0602.	,	XXX		, ,	
0603.					
	Summary of remaining write-ins for Line 6 from overflow page				Λ
0698.			0		0
0699.	Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX		,	0
0701.	Loan forgiveness and other income		•		
0702.		XXX		-	
0703.					
0798.	Summary of remaining write-ins for Line 7 from overflow page	XXX			0
0799.	Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	211,124	0	0
1401.					
1402.					
1403				-	
1498.	Summary of remaining write-ins for Line 14 from overflow page		0	0	0
1499.	Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)		0 0	0	0
2901.	Misc. Expense		(37,444)	
2902.					
2903					
	Summary of remaining write-ins for Line 29 from overflow page			0	0
2998.	Summary of remaining write-ins for Line 29 from overnow hane				

STATEMENT OF REVENUE AND EXPENSES (Continued)

	STATEMENT OF REVENUE AND	1	2	3
		Current Year to Date	Prior Year to Date	Prior Year Ended December 31
	CAPITAL AND SURPLUS ACCOUNT			
33.	Capital and surplus prior reporting year	(2,566,648)	1,667,202	1,667,202
34.	Net income or (loss) from Line 32	46,560	(2,730,235)	(7,563,850)
35.	Change in valuation basis of aggregate policy and claim reserves			
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$		13,176	0
37.	Change in net unrealized foreign exchange capital gain or (loss)			
38.	Change in net deferred income tax			
39.	Change in nonadmitted assets			0
40	Change in unauthorized and certified reinsurance	0	0	0
41.	Change in treasury stock	0	0	0
42.	Change in surplus notes	0	0	0
43.	Cumulative effect of changes in accounting principles			
44.	Capital Changes:			
	44.1 Paid in	4,380,000	340,000	3,330,000
	44.2 Transferred from surplus (Stock Dividend)	0	0	0
	44.3 Transferred to surplus			
45.	Surplus adjustments:			
	45.1 Paid in	0	0	0
	45.2 Transferred to capital (Stock Dividend)			
	45.3 Transferred from capital			
46.	Dividends to stockholders			
47.	Aggregate write-ins for gains or (losses) in surplus	(14,731)	0	0
48.	Net change in capital & surplus (Lines 34 to 47)	4,411,829	(2,377,059)	(4,233,850)
49.	Capital and surplus end of reporting period (Line 33 plus 48)	1,845,181	(709,857)	(2,566,648)
	DETAILS OF WRITE-INS			
4701.	Impact of Change to Allowable Cost (FY 2021) from FMV (FY 2020)	(14,731)		
4702.				
4703.				
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799.	Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	(14,731)	0	0

CASH FLOW

			_	
		1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
	Cash from Operations	10 Date	10 Date	December 31
1.	Premiums collected net of reinsurance	3,846,523	5, 103,894	9, 155, 687
2.	Net investment income	25,885	29,596	48,508
3.	Miscellaneous income	212,519	68,731	286,590
4.	Total (Lines 1 to 3)	4,084,927	5,202,221	9,490,785
5.	Benefit and loss related payments			8.094.364
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7.	Commissions, expenses paid and aggregate write-ins for deductions			
8.			, , , , ,	, , ,
9.	Federal and foreign income taxes paid (recovered) net of \$ tax on capital			
	gains (losses)	0	0	0
10.	Total (Lines 5 through 9)	6,453,583	6,004,287	12,485,810
11.	Net cash from operations (Line 4 minus Line 10)	(2,368,656)	(802,066)	(2,995,025)
11.	Net cash non operations (Line 4 minus Line 10)	(2,000,000)	(002,000)	(2,000,020)
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	1,463,804	518,495	690,000
		0	•	0
	12.3 Mortgage loans			
	12.4 Real estate			0
		0		0
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments			0
	12.7 Miscellaneous proceeds	30,142	0	2
	12.8 Total investment proceeds (Lines 12.1 to 12.7)			690 002
13.	Cost of investments acquired (long-term only):			
10.	13.1 Bonds	0	1 005 422	1 361 508
		0	, ,	0
		0		0
	13.4 Real estate		0	0
		0	0	0
	13.6 Miscellaneous applications	0	0	30,142
	13.7 Total investments acquired (Lines 13.1 to 13.6)	0	1,095,422	1,391,650
14.	Net increase (or decrease) in contract loans and premium notes	0	0	0
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	1,493,946	(576,927)	(701,648)
13.	Net cash non investments (Line 12.0 minus Line 13.7 and Line 14)	1,430,340	(370,927)	(701,040)
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes	0	0	0
	16.2 Capital and paid in surplus, less treasury stock	4,380,000	340,000	3,330,000
	16.3 Borrowed funds	(187,500)	187,500	187,500
	16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	0
	16.5 Dividends to stockholders	0	0	0
	16.6 Other cash provided (applied)	(351,998)	214,657	1,088,417
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	3,840,502	742, 157	4,605,917
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18.	·	2,965,792	(636,836)	909,244
19.	Cash, cash equivalents and short-term investments:	2,000,702	(300,000)	
13.	•	1,845,169	935,925	935,925
	10.1 Dogmining of your	1,070,100		

Note: Supplemental disclosures of cash flow information for non-cash transactions:		
		l

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

		Comprehe (Hospital & I	ensive	4	5	6	7	8	9	10
	Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year	415	0	0	0	0	0	0	415	0	
2. First Quarter	692	0	0	0	0	0	0	692	0	
3. Second Quarter	657	0	0	0	0	0	0	657	0	
4. Third Quarter	627							627		
5. Current Year	627							627		
6. Current Year Member Months	5,910							5,910		
Total Member Ambulatory Encounters for Period:										
7 Physician	4,206							4,206		
8. Non-Physician	9,348							9,348		
9. Total	13,554	0	0	0	0	0	0	13,554	0	
10. Hospital Patient Days Incurred	586							586		
11. Number of Inpatient Admissions	104							104		
12. Health Premiums Written (a)	6,881,374							6,881,374		
13. Life Premiums Direct	0							0		
14. Property/Casualty Premiums Written	0							0		
15. Health Premiums Earned	6,881,374							6,881,374		
16. Property/Casualty Premiums Earned	0							0		
17. Amount Paid for Provision of Health Care Services	2,444,766							2,444,766		
18. Amount Incurred for Provision of Health Care Services	6,671,512			_				6,671,512	_	

⁽a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

	Aging Analysis of Unpaid Claims					
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
Claims Unpaid (Reported)						
				 		
				+		
0299999 Aggregate accounts not individually listed-uncovered	100.000					100
0399999 Aggregate accounts not individually listed-covered	186,202					186,
0499999 Subtotals	186,202	0	0	0	0	186,
0599999 Unreported claims and other claim reserves						
0699999 Total amounts withheld						
0799999 Total claims unpaid						186,
0899999 Accrued medical incentive pool and bonus amounts	<u> </u>					-

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE								
	Claims		Lial		5	6		
	Year to			rent Quarter				
	1	2	3	4				
						Estimated Claim		
	On		On			Reserve and		
	Claims Incurred Prior	On	Claims Unpaid	On	Claims Incurred in	Claim Liability		
	to January 1 of	Claims Incurred	Dec. 31	Claims Incurred	Prior Years	December 31 of		
Line of Business	Current Year	During the Year	of Prior Year	During the Year	(Columns 1 + 3)	Prior Year		
						0		
Comprehensive (hospital and medical)					0	0		
2. Medicare Supplement					0	0		
2. Wediene Suppliment								
3. Dental Only					0	0		
					0	•		
4. Vision Only					0	0		
5. Federal Employees Health Benefits Plan					0	0		
5. Federal Employees Fleatin Deficitis Flati					0			
6. Title XVIII - Medicare	429,311	5,828,334	0	1,360,202	429,311	946,335		
						•		
7 Title XIX - Medicaid					0	0		
8. Other health					0	0		
0. Outer Health								
9. Health subtotal (Lines 1 to 8)	429,311	5,828,334	0	1,360,202	429,311	946,335		
, , , , , , , , , , , , , , , , , , , ,		, ,		. ,	, ,	,		
					_	_		
10. Healthcare receivables (a)					0	0		
11. Other non-health					n	n		
11. Other non-nearth					0	0		
12. Medical incentive pools and bonus amounts					0	0		
			_					
13. Totals (Lines 9-10+11+12)	429,311	5,828,334	0	1,360,202	429,311	946,335		

⁽a) Excludes \$ loans or advances to providers not yet expensed.

NOTE 1 Summary of Significant Accounting Policies and Going Concern

Accounting Practices

The financial statements of Reliance HMO, Inc are presented on the basis of accounting practices prescribed or permitted by the Michigan Department of Insurance.

Timeriolar statemente er renarios rime, ino are presented on		F/S	F/S	 	, 	
	SSAP#	Page	Line #	 2021		2020
NET INCOME						
(1) State basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	\$ 46,560	\$	(7,849,543)
(2) State Prescribed Practices that are an increase/ (decrease) from NAIC SAP:						
(3) State Permitted Practices that are an increase/(decrease from NAIC SAP:)					
(4) NAIC SAP (1-2-3=4)	XXX	xxx	xxx	\$ 46,560	\$	(7,849,543)
SURPLUS						
(5) State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 1,845,181	\$	(2,557,253)
(6) State Prescribed Practices that are an increase/(decreas	e) from NAIC SA	AP:				
(7) State Permitted Practices that are an increase/(decrease	e) from NAIC SA	P:				

(8) NAIC SAP (5-6-7=8)

Use of Estimates in the Preparation of the Financial Statements
The preparation of financial statements in conformity with statutory accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the statutory financial statements and the reported amounts of revenue and expenses duiring the reporting period. Actual results could differ from those estimates. The statement in includes estimates of incurred but not reported claims, using historical claims experience as a basis for the estimates

XXX

XXX

1,845,181

(2,557,253)

Accounting Policy

Cash and Cash Equivalents - Cash consists of cash on deposit and certificates of deposit with maturity dates within one year of the acquisition date.

XXX

Investments - Bonds are valued in accordance with the valuations prescribed by the NAIC.

Premium Deficiency Reserve - the Company determined that a premium deficiency reserve is necessary to reserve for anticipated losses, loss adjustment expenses and other costs which exceed the anticipated premium revenues.

Investment Income - investment income consists primarily of interest on investments held by the Company Income Taxes - an asset or liability is recognized for the estimated federal income taxes (FIT) payable or refundable at each reporting period. The Company has recorded only losses in the first two years of operations, and has recorded no assets or liabilities for as of December 31, 2020.

Going Concern

Management has evaluated the Plan's ability to continue as a going concern. Management believes that investors will contribute capital as necessary to fund operations of the company. With the current cash on hand and the projection of incoming cash, the Plan continues to be able to meet the daily financial needs to pay all liabilities and accrued expenses. The Plan continues to focus on building its capital and surplus.

NOTE 2 Accounting Changes and Corrections of Errors

Not Applicable

NOTE 3 Business Combinations and Goodwill

Statutory Purchase Method Not Applicable

The transaction was accounted for as a statu	utory purchase, ar	nd reflects the follow	ving:			
1	2	3	4	5	6	7
					Amount of Goodwill	Admitted Goodwill
			Original Amount	Admitted Goodwill		as a % of SCA
	Acquisition	Cost of Acquired	of Admitted	as of the	the Reporting	BACV, Gross of
Purchased Entity	Date	Entity	Goodwill	Reporting Date	Period	Admitted Goodwill

Statutory Merger Not Applicable

Assumption Reinsurance Not Applicable

D. Impairment Loss Not Applicable

NOTE 4 Discontinued Operations Not Applicable

Discontinued Operation Disposed of or Classified as Held for Sale

(1) List of Discontinued Operations Disposed of or Classified as Held for Sale

Discontinued	
Operation	
Identifier	Description of Discontinued Operation

(2) Not Applicable

(3) Loss Recognized on Discontinued Operations

Discontinued

		Operation Identifier		t for Reportin Period	cumulative Amount Since Classified as Held for Sale		
	(4		int and Fair Value lount of Discontinu		nued Operations and the Effect on Assets, Lins	iabilities, Surplus and Income	
		Discontinue Operation Identifier	Carrying A d Immediate to Classif as Held fo	ely Prior fication	Current Fair Value Less Costs to Sell		
		b. Effect of Dis	continued Operati	ions on Asse	ets, Liabilities, Surplus and Income		
			Discontinued Operation Identifier	Line Number	Line Descrip	otion	Amount Attributable to Discontinued Operations
		1. Assets	- Identine:			7.1011	
		2. Liabilities					
		3. Surplus					
		4. Income					
В.		e in Plan of Sale o plicable	of Discontinued Op	peration			
C.		of Any Significan plicable	t Continuing Invol	vement with	Discontinued Operations After Disposal		
D.		Interest Retained plicable	in the Discontinue	ed Operation	After Disposal		
NOT	E5 In	nvestments					
A.		ge Loans, includir 1) Not Applicable		al Estate Loa	ins		
	(2	2) Not Applicable					
	(3	Taxes, assessr total	ments and any an	nounts advar	nced and not included in the mortgage loan	Current Year	Prior Year

(4) Age Analysis of Mortgage Loans and Identification of Mortgage Loans in Which the Insurer is a Participant or Co-lender in a Mortgage Loan Agreement:

		Resid	Residential		Commercial		
	Farm	Insured	All Other	Insured	All Other	Mezzanine	Total
a. Current Year							
Recorded Investment (All)							
(a) Current							\$ -
(b) 30 - 59 Days Past Due							\$ -
(c) 60 - 89 Days Past Due							\$ -
(d) 90 - 179 Days Past Due							\$ -
(e) 180+ Days Past Due							\$ -
2. Accruing Interest 90 - 179 Days Past							
Due							
(a) Recorded Investment							\$ -
(b) Interest Accrued							\$ -
Accruing Interest 180+ Days Past Due							
(a) Recorded Investment							\$ -
(b) Interest Accrued							\$ -
Interest Reduced							
(a) Recorded Investment							\$ -
(b) Number of Loans							\$ -
(c) Percent Reduced							
Participant or Co-lender in a Mortgage Loan Agreement							
(a) Recorded Investment							\$ -
b. Prior Year							
Recorded Investment (All)							
(a) Current							\$ -
(b) 30 - 59 Days Past Due							\$ -
(c) 60 - 89 Days Past Due							\$ -
(d) 90 - 179 Days Past Due							\$ -
(e) 180+ Days Past Due							\$ -
2. Accruing Interest 90 - 179 Days Past							
Due							

(a) Recorded Investment				\$	-
(b) Interest Accrued				\$	-
3. Accruing Interest 180+ Days Past Due					
(a) Recorded Investment				\$	-
(b) Interest Accrued				\$	-
Interest Reduced					
(a) Recorded Investment				\$	-
(b) Number of Loans				\$	-
(c) Percent Reduced					
Participant or Co-lender in a Mortgage Loan Agreement					
(a) Recorded Investment	1			¢	_

(5) Investment in Impaired Loans With or Without Allowance for Credit Losses and Impaired Loans Subject to a Participant or Co-lender Mortgage Loan Agreement for Which the Reporting Entity is Restricted from Unilaterally Foreclosing on the Mortgage Loan Agreement:

		Resi	dential	Comr	nercial		
	Farm	Insured	All Other	Insured	All Other	Mezzanine	Total
a. Current Year 1. With Allowance for Credit Losses 2. No Allowance for Credit Losses 3. Total (1 + 2)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ - \$ - \$ -
4. Subject to a participant or co-lender mortgage loan agreement for which the reporting entity is restricted from unilaterally foreclosing on the mortgage loan b. Prior Year 1. With Allowance for Credit Losses 2. No Allowance for Credit Losses 3. Total (1 + 2)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ - \$ - \$ -
Subject to a participant or co-lender mortgage loan agreement for which the reporting entity is restricted from unilaterally foreclosing on the mortgage loan							\$ -

(6) Investment in Impaired Loans – Average Recorded Investment, Interest Income Recognized, Recorded Investment on Nonaccrual Status and Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting:

		Resid	dential	Comr	nercial			
	Farm	Insured	All Other	Insured	All Other	Mezzanine	Total	
a. Current Year								
Average Recorded Investment							\$	-
Interest Income Recognized							\$	-
Recorded Investments on Nonaccrual Status							\$	-
Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting							\$	_
b. Prior Year								
Average Recorded Investment							\$	-
Interest Income Recognized							\$	-
Recorded Investments on Nonaccrual Status							\$	-
Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting							ę.	

	Method of Accounting							\$
(7)	Allowance for credit losses:				Current	Voor	Dries Vee	_
	a) Balance at beginning of period				Current	Year	Prior Yea	<u> </u>
	b) Additions charged to operations							
	c) Direct write-downs charged against the allowan	ces						
	d) Recoveries of amounts previously charged off							
	e) Balance at end of period				\$	-	\$	-
(8)	Mortgage Loans Derecognized as a Result of For	eclosure:			0	V.		
	a) Aggregate amount of mortgage loans derecogr b) Real estate collateral recognized c) Other collateral recognized	ized			Current	Year_		
	d) Receivables recognized from a government gu	arantee of the	foreclosed mort	tgage loan				
(9)	Not Applicable							
Res	structuring Not Applicable				0	V	Drian Van	_
(1)	The total recorded investment in restructured loar	ıs, as of year e	nd		Current	rear	Prior Yea	<u>r</u>

- (2) The realized capital losses related to these loans
 (3) Total contractual commitments to extend credit to debtors owning receivables whose terms have been modified in troubled debt restructurings
- (4) Not Applicable
- Reverse Mortgages
 (1) Not Applicable
 (2) Not Applicable Not Applicable

 - (3) Reverse Mortgages: Enter the reserve amount that is netted against the asset
 (4) Reverse Mortgages: Investment income or (loss) recognized in the period as a result of the re-estimated cash flows
- Loan-Backed Securities

В. Debt

(1) Not Applicable

(2)	OTTI recognized 1st Quarter
	a. Intent to sell

- b. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis
- c. Total 1st Quarter
- OTTI recognized 2nd Quarter
- d. Intent to sell
- e. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis
- f. Total 2nd Quarter
- OTTI recognized 3rd Quarter
- g. Intent to sell
- h. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis
- i. Total 3rd Quarter
- OTTI recognized 4th Quarter
- j. Intent to sell
- k. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis
- I. Total 4th Quarter
- m. Annual Aggregate Total

1 Amortized Cost Basis Before Other-than-	2 Other-than- Temporary Impairment	3
Temporary Impairment	Recognized in Loss	Fair Value 1 - 2
		\$ -
		\$ -
-	\$ -	\$ -
		\$ - \$ -
\$ -	\$ -	\$ -
		\$ -
\$ -	\$ -	\$ - \$ -
	Ψ	\$ -
		\$ -
\$ -	\$ -	\$ -
	\$ -	

1	2	3	4	5	6	7
CUSIP	Book/Adjusted Carrying Value Amortized Cost Before Current Period OTTI	Present Value of Projected Cash Flows	Recognized Other-Than- Temporary Impairment	Amortized Cost After Other-Than- Temporary Impairment	Fair Value at time of OTTI	Date of Financial Statement Where Reported
Total	XXX	XXX	\$ -	XXX	XXX	XXX

- a) The aggregate amount of unrealized losses:
 - 1. Less than 12 Months
 - 2. 12 Months or Longer
- b)The aggregate related fair value of securities with unrealized losses:
 - 1. Less than 12 Months
 - 2. 12 Months or Longer
- (5) Not Applicable
- Dollar Repurchase Agreements and/or Securities Lending Transactions (1) Not Applicable

 - (2) Not Applicable
 - (3) Collateral Received
 - a. Aggregate Amount Collateral Received

	Fair \	Value
1. Securities Lending		
(a) Open		
(b) 30 Days or Less		
(c) 31 to 60 Days		
(d) 61 to 90 Days		
(e) Greater Than 90 Days		
(f) Subtotal	\$	-
(g) Securities Received		
(h) Total Collateral Received	\$	-
2. Dollar Repurchase Agreement		
(a) Open		
(b) 30 Days or Less		
(c) 31 to 60 Days		
(d) 61 to 90 Days		
(e) Greater Than 90 Days		
(f) Subtotal	\$	-
(g) Securities Received		
(h) Total Collateral Received	\$	-
b. The fair value of that collateral and of the portion of that collateral that it has sold or		
repledged		

- c. Not Applicable
- (4) Not Applicable
- (5) Collateral Reinvestment
 - a. Aggregate Amount Collateral Reinvested
 - 1. Securities Lending
 - (a) Open
 - (b) 30 Days or Less
 - (c) 31 to 60 Days (d) 61 to 90 Days

Amortized Cost Fair Value

\$

\$

SECOND

QUARTER

SECOND

QUARTER

QUARTER

THIRD

QUARTER

\$

\$

\$

FOURTH

QUARTER

FOURTH

QUARTER

- (e) 91 to 120 Days
- (f) 121 to 180 Days
- (g) 181 to 365 Days
- (h) 1 to 2 years
- (i) 2 to 3 years
- (j) Greater than 3 years
- (k) Subtotal (I) Securities Received (m) Total Collateral Reinvested
- 2. Dollar Repurchase Agreement
 - (a) Open
 - (b) 30 Days or Less
 - (c) 31 to 60 Days
 - (d) 61 to 90 Days
- (e) 91 to 120 Days
- (f) 121 to 180 Days (g) 181 to 365 Days
- (h) 1 to 2 years
- (i) 2 to 3 years
- (j) Greater than 3 years
- (k) Subtotal (I) Securities Received
- (m) Total Collateral Reinvested
- b. Not Appliable
- (6) Not Applicable

(7) Collateral for securities lending transactions that extend beyond one year from the reporting date

Description of Collateral	Amount
Total Collateral Extending beyond one year of the reporting date	\$ -

- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing
 - (1) Not Applicable

REPURCHASE TRANSACTION - CASH TAKER - OVERVIEW OF SECURED BORROWING TRANSACTIONS

QUARTER

QUARTER

- (2) Type of Repo Trades Used
 - a. Bilateral (YES/NO)
 - b. Tri-Party (YES/NO)
- (3) Original (Flow) & Residual Maturity
 - a. Maximum Amount
 - 1. Open No Maturity
 - 2. Overnight
 - 3. 2 Days to 1 Week
 - 4. > 1 Week to 1 Month
 - 5. > 1 Month to 3 Months 6. > 3 Months to 1 Year
 - 7. > 1 Year
 - b. Ending Balance
 - 1. Open No Maturity
 - 2. Overnight
 - 3. 2 Days to 1 Week
 - 4. > 1 Week to 1 Month
 - 5. > 1 Month to 3 Months 6. > 3 Months to 1 Year
 - 7. > 1 Year
- (4) Not Applicable
- (5) Securities "Sold" Under Repo Secured Borrowing
 - a. Maximum Amount
 - 1. BACV
 - 2. Nonadmitted Subset of BACV
 - 3. Fair Value
 - b. Ending Balance
 - 1. BACV
 - 2. Nonadmitted Subset of BACV
 - 3. Fair Value

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
XXX	XXX	XXX	

(6) Securities Sold Under Repo - Secured Borrowing by NAIC Designation

ENDING BALANCE

- a. Bonds BACV
- b. Bonds FV c. LB & SS - BACV
- d. LB & SS FV
- e. Preferred Stock BACV

1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3

f. Preferred Stock - FV g. Common Stock h. Mortgage Loans - BACV i. Mortgage Loans - FV j. Real Estate - BACV k. Real Estate - FV l. Derivatives - BACV m. Derivatives - FV n. Other Invested Assets - BACV o. Other Invested Assets - FV p. Total Assets - BACV q. Total Assets - FV	\$ - \$ -			Б - Б -
ENDING BALANCE				
ENDING BALANGE	5	6	7	8
	NAIC 4	NAIC 5	NAIC 6	NON- ADMITTED
a. Bonds - BACV b. Bonds - FV c. LB & SS - BACV d. LB & SS - FV e. Preferred Stock - BACV f. Preferred Stock - FV g. Common Stock h. Mortgage Loans - BACV i. Mortgage Loans - FV j. Real Estate - BACV k. Real Estate - FV l. Derivatives - BACV m. Derivatives - FV				
n. Other Invested Assets - BACV				
o. Other Invested Assets - FV p. Total Assets - BACV	\$ -	\$ -	\$ -	-
q. Total Assets - FV	\$ -	\$ -	\$ - 9	-
(7) Collateral Received – Secured Borrowing		<u> </u>	Т	
	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount 1. Cash				
2. Securities (FV)				
b. Ending Balance1. Cash2. Securities (FV)				
(8) Cash & Non-Cash Collateral Received - Secured Borrowin	ng by NAIC Designati	ion		
ENDING BALANCE				
	1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3
a. Cash b. Bonds - FV c. LB & SS - FV d. Preferred Stock - FV e. Common Stock f. Mortgage Loans - FV g. Real Estate - FV h. Derivatives - FV i. Other Invested Assets - FV j. Total Collateral Assets - FV (Sum of a through i)	\$ -	\$ -	\$ -	\$ -
ENDING BALANCE		1		
a. Cash b. Bonds - FV c. LB & SS - FV d. Preferred Stock - FV e. Common Stock f. Mortgage Loans - FV g. Real Estate - FV h. Derivatives - FV	5 NAIC 4	6 NAIC 5	7 NAIC 6	8 DOES NOT QUALIFY AS ADMITTED
i. Other Invested Assets - FV				
j. Total Collateral Assets - FV (Sum of a through i)		-	\$ - [\$	-
(9) Allocation of Aggregate Collateral by Remaining Contractua	I Maturity			FAIR VALUE
a. Overnight and Continuousb. 30 Days or Lessc. 31 to 90 Daysd. > 90 Days				
(10) Allocation of Aggregate Collateral Reinvested by Remainin	ng Contractual Matur	ity		
a. 30 Days or Less b. 31 to 60 Days c. 61 to 90 Days d. 91 to 120 Days	.g comunical mutur		AMORTIZED COST	FAIR VALUE

e. 121 to 180 Days	
f. 181 to 365 Days	
g. 1 to 2 years	
h. 2 to 3 years	
i. > than 3 years	

- (11) Liability to Return Collateral Secured Borrowing (Total)
 - a. Maximum Amount 1. Cash (Collateral – All)
 - 2. Securities Collateral (FV)
 - b. Ending Balance
 - 1. Cash (Collateral All)
 - 2. Securities Collateral (FV)

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER

THIRD

THIRD

QUARTER

FOURTH

QUARTER

FOURTH

QUARTER

SECOND

QUARTER

SECOND

QUARTER

- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing
 - (1) Not Applicable

REPURCHASE TRANSACTION – CASH PROVIDER – OVERVIEW OF SECURED BORROWING TRANSACTIONS

FIRST

QUARTER

FIRST

QUARTER

- (2) Type of Repo Trades Used
 - a. Bilateral (YES/NO)
- b. Tri-Party (YES/NO)

(3)	Original	(Flow)	&	Residual	Maturity

- a. Maximum Amount
 - 1. Open No Maturity
 - 2. Overnight
- 3. 2 Days to 1 Week
- 4. > 1 Week to 1 Month
- 5. > 1 Month to 3 Months
- 6. > 3 Months to 1 Year
- 7. > 1 Year
- b. Ending Balance
 - 1. Open No Maturity
- 2. Overnight
- 3. 2 Days to 1 Week
- 4. > 1 Week to 1 Month 5. > 1 Month to 3 Months
- 6. > 3 Months to 1 Year
- 7. > 1 Year
- (4) Not Applicable
- (5) Fair Value of Securities Acquired Under Repo Secured Borrowing

a. Maximum Amount
b. Ending Balance

FIRST	SECOND	THIRD	FOURTH
QUARTER	QUARTER	QUARTER	QUARTER

(6) Securities Acquired Under Repo - Secured Borrowing by NAIC Designation

ENDING BALANCE

- a. Bonds FV
- b. LB & SS FV
- c. Preferred Stock FV
- d. Common Stock
- e. Mortgage Loans FV
- f. Real Estate FV
- g. Derivatives FV
- h. Other Invested Assets FV
- i. Total Assets FV (Sum of a through h)

l	NONE	NAIC 1	NAIC 2	NAIC 3
ĺ				
ı				
ı				
ı				
ı				
ı	\$ -	\$ -	\$ -	\$ -

ENDING BALANCE

- a. Bonds FV
- b. LB & SS FV
- c. Preferred Stock FV
- d. Common Stock e. Mortgage Loans - FV
- f. Real Estate FV
- g. Derivatives FV
- h. Other Invested Assets FV
- i. Total Assets FV (Sum of a through h)
- (7) Collateral Provided Secured Borrowing

5 NAIC 4	6 NAIC 5	7 NAIC 6	8 DOES NOT QUALIFY AS ADMITTED
\$ -	\$ -	\$ -	\$ -

		·	
FIRST	SECOND	THIRD	FOURTH
QUARTER	QUARTER	QUARTER	QUARTER

a. Maximum Amount				
1. Cash				
2. Securities (FV)				
3. Securities (BACV)	XXX	XXX	XXX	XXX
4. Nonadmitted Subset (BACV)	XXX	XXX	XXX	XXX
b. Ending Balance				
1. Cash				
2. Securities (FV)				
3. Securities (BACV)				
4. Nonadmitted Subset (BACV)				

(8) Allocation of Aggregate Collateral Pledged by Remaining Contractual Maturity

	AMORTIZED COST	FAIR VALUE
a. Overnight and Continuous		
b. 30 Days or Less		
c. 31 to 90 Days		
d. > 90 Days		

(9) Recognized Receivable for Return of Collateral - Secured Borrowing

FIRST SECOND THIRD FOURTH QUARTER QUARTER **QUARTER** QUARTER a. Maximum Amount 1. Cash 2. Securities (FV) b. Ending Balance 1. Cash

(10) Recognized Liability to Return Collateral – Secured Borrowing (Total)

FIRST SECOND THIRD FOURTH QUARTER QUARTER QUARTER QUARTER Repo Securities Sold/Acquired with Cash Collateral
 Repo Securities Sold/Acquired with Securities Collateral (FV) b. Ending Balance Repo Securities Sold/Acquired with Cash Collateral
 Repo Securities Sold/Acquired with Securities
 Collateral (FV)

- Repurchase Agreements Transactions Accounted for as a Sale
 - (1) Not Applicable

REPURCHASE TRANSACTION - CASH TAKER - OVERVIEW OF SALE TRANSACTIONS

(2) Type of Repo Trades Used

2. Securities (FV)

a. Bilateral (YES/N	NO)
b. Tri-Party (YES/	NO)

FIRST	SECOND	THIRD	FOURTH
QUARTER	QUARTER	QUARTER	QUARTER

(3) Original (Flow) & Residual Maturity

Maximum Amount
 Open – No Maturity
Overnight
3. 2 Days to 1 Week
4. > 1 Week to 1 Month
5. > 1 Month to 3 Months
6. > 3 Months to 1 Year
7. > 1 Year
b. Ending Balance

1. Open - No Maturity			
2. Overnight			
3. 2 Days to 1 Week			
4. > 1 Week to 1 Month			
5. > 1 Month to 3 Months			
6. > 3 Months to 1 Year			
7. > 1 Year			

(4)	Not Applicable

(5) Securities "Sold" Under Repo - Sale

a. Maximum Amount 1. BACV
Nonadmitted - Subset of BACV
3. Fair Value
b. Ending Balance

2. Nonadmitted - Subset of BACV

3. Fair Value

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
xxx xxx	xxx xxx	xxx xxx	
	***	***	
xxx	xxx	xxx	
XXX	XXX	XXX	

(6) Securities Sold Under Repo - Sale by NAIC Designation

ENDING BALANCE

- a. Bonds BACV
- b. Bonds FV
- c. LB & SS BACV
- d. LB & SS FV
- e. Preferred Stock BACV
- f. Preferred Stock FV
- g. Common Stock
- h. Mortgage Loans BACV
- i. Mortgage Loans FV
- j. Real Estate BACV
- k. Real Estate FV
- I. Derivatives BACV
- m. Derivatives FV n. Other Invested Assets - BACV
- o. Other Invested Assets FV
- p. Total Assets BACV
- q. Total Assets FV

ENDING BALANCE

- a. Bonds BACV
- b. Bonds FV
- c. LB & SS BACV
- d. LB & SS FV
- e. Preferred Stock BACV
- f. Preferred Stock FV
- g. Common Stock
- h. Mortgage Loans BACV
- i. Mortgage Loans FV j. Real Estate BACV
- k. Real Estate FV
- I. Derivatives BACV
- m. Derivatives FV
- n. Other Invested Assets BACV
- o. Other Invested Assets FV
- p. Total Assets BACV
- q. Total Assets FV

(7) Proceeds Received - Sale

- a. Maximum Amount
 - 1 Cash
- 2. Securities (FV)
- 3. Nonadmitted
- b. Ending Balance
 - 1. Cash
- 2. Securities (FV)
- 3. Nonadmitted

1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3
\$ -	\$ -	\$ -	\$ -
\$ -	\$ -	\$ -	\$ -

5	6	7	8 NON-
NAIC 4	NAIC 5	NAIC 6	ADMITTED
•	•	•	*
\$ -	\$ -	\$ -	\$ -

SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER

(8) Cash & Non-Cash Collateral Received - Sale by NAIC Designation

ENDING BALANCE

- a. Bonds FV
- b. LB & SS FV
- c. Preferred Stock FV
- d. Common Stock
- e. Mortgage Loans FV
- f. Real Estate FV
- g. Derivatives FV
- h. Other Invested Assets FV
- i. Total Collateral Assets FV (Sum of a through h)

1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3
\$ -	\$ -	\$ -	\$ -

6

NAIC 5

7

NAIC 6

NON-

DMITTED

ENDING BALANCE

- a. Bonds FV
- b. LB & SS FV
- c. Preferred Stock FV
- d. Common Stock
- e. Mortgage Loans FV
- f. Real Estate FV
- g. Derivatives FV
- h. Other Invested Assets FV
- i. Total Collateral Assets FV (Sum of a through h)

5

NAIC 4

- (9) Recognized Forward Resale Commitment
 - a. Maximum Amount
 - b. Ending Balance

FIRST	SECOND	THIRD	FOURTH
QUARTER	QUARTER	QUARTER	QUARTER

FIRST

QUARTER

- Reverse Repurchase Agreements Transactions Accounted for as a Sale
 - (1) Not Applicable

REPURCHASE TRANSACTION - CASH PROVIDER - OVERVIEW OF SALE TRANSACTIONS

- (2) Type of Repo Trades Used
 - a. Bilateral (YES/NO)
 - b. Tri-Party (YES/NO)

FIRST	SECOND	THIRD	FOURTH
QUARTER	QUARTER	QUARTER	QUARTER

THIRD

QUARTER

FOURTH

QUARTER

SECOND

QUARTER

- (3) Original (Flow) & Residual Maturity
 - a. Maximum Amount
 - 1. Open No Maturity
 - 2. Overnight
 - 3. 2 Days to 1 Week
 - 4. > 1 Week to 1 Month
 - 5. > 1 Month to 3 Months
 - 6. > 3 Months to 1 Year
 - 7 > 1 Year
 - b. Ending Balance
 - 1. Open No Maturity
 - 2. Overnight
 - 3. 2 Days to 1 Week
 - 4. > 1 Week to 1 Month
 - 5. > 1 Month to 3 Months
 - 6. > 3 Months to 1 Year
 - 7. > 1 Year
- (4) Not Applicable
- (5) Securities Acquired Under Repo Sale
 - a. Maximum Amount
 - 1. BACV
 - 2. Nonadmitted Subset of BACV
 - 3. Fair Value
 - b. Ending Balance
 - 1. BACV
 - 2. Nonadmitted Subset of BACV
 - 3. Fair Value

- THIRD SECOND **FOURTH** FIRST QUARTER QUARTER QUARTER XXX XXX XXX XXX XXX XXX XXX XXX XXX XXX
- (6) Securities Acquired Under Repo Sale by NAIC Designation

ENDING BALANCE

- a. Bonds BACV
- b. Bonds FV
- c. LB & SS BACV
- d. LB & SS FV
- e. Preferred Stock BACV
- f. Preferred Stock FV
- g. Common Stock
- h. Mortgage Loans BACV
- i. Mortgage Loans FV j. Real Estate BACV
- k. Real Estate FV
- I. Derivatives BACV
- m. Derivatives FV
- n. Other Invested Assets BACV
- o. Other Invested Assets FV
- p. Total Assets BACV
- q. Total Assets FV

1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3
\$ -	\$ -	\$ -	\$ -
\$ -	\$ -	\$ -	\$ -

ENDING BALANCE

- a. Bonds BACV
- b. Bonds FV
- c. LB & SS BACV
- d. LB & SS FV
- e. Preferred Stock BACV f. Preferred Stock - FV
- g. Common Stock
- h. Mortgage Loans BACV
- i. Mortgage Loans FV
- j. Real Estate BACV
- k. Real Estate FV
- I. Derivatives BACV
- m. Derivatives FV
- n. Other Invested Assets BACV
- o. Other Invested Assets FV
- p. Total Assets BACV
- q. Total Assets FV

5	6	7	8 NON-
NAIC 4	NAIC 5	NAIC 6	ADMITTED
\$ -	\$ -	\$ -	\$ -
\$ -	\$ -	\$ -	\$ -

- (7) Proceeds Provided Sale
 - a. Maximum Amount
 - 1. Cash
 - 2. Securities (FV)
 - 3. Securities (BACV)
 - 4. Nonadmitted Subset (BACV)
 - b. Ending Balance
 - 1. Cash
 - 2. Securities (FV)
 - 3. Securities (BACV)
 - 4. Nonadmitted Subset (BACV)
- (8) Recognized Forward Resale Commitment

nt
n

b. Ending Balance

1	Real	Fstate

- (1) Not Applicable
- (2) Not Applicable
- (3) Not Applicable
- (4) Not Applicable
- (5) Not Applicable
- Low Income Housing tax Credits (LIHTC) (1) Not Applicable

 - (2) Not Applicable
 - (3) Not Applicable
 - (4) Not Applicable
 - (5) Not Applicable
 - (6) Not Applicable
 - (7) Not Applicable

FIRST	SECOND	THIRD	FOURTH
QUARTER	QUARTER	QUARTER	QUARTER
XXX	xxx	xxx	xxx
XXX	xxx	xxx	xxx

FIRST	SECOND	THIRD	FOURTH
QUARTER	QUARTER	QUARTER	QUARTER

Restricted Assets

1. Restricted Assets (Including Pledged)

Restricted Asset Category	Total Gross (Admitted & Non- admitted) Restricted from Current Year	Total Gross (Admitted & Non- admitted) Restricted from Prior Year	Increase/ (Decrease) (1 minus 2)	Total Current Year Non- admitted Restricted	Total Current Year Admitted Restricted (1 minus 4)	6 Gross (Admitted & Non- admitted) Restricted to Total Assets (a)	Admitted Restricted to Total Admitted Assets (b)
a. Subject to contractual obligation for which							
liability is not shown			\$ -		\$ -	0.000%	0.000%
b. Collateral held under security lending agreements			\$ -		\$ -	0.000%	0.000%
c. Subject to repurchase agreements			\$ -		\$ -	0.000%	0.000%
d. Subject to reverse repurchase agreements			\$ -		\$ -	0.000%	0.000%
e. Subject to dollar repurchase agreements f. Subject to dollar reverse repurchase			\$ -		\$ -	0.000%	0.000%
agreements			\$ -		\$ -	0.000%	0.000%
g. Placed under option contracts			\$ -		\$ -	0.000%	0.000%
h. Letter stock or securities restricted as to sale						0.0000/	0.0000/
- excluding FHLB capital stock i. FHLB capital stock			\$ -		\$ -	0.000% 0.000%	0.000% 0.000%
j. On deposit with states			\$ - \$ -		\$ - \$ -	0.000%	0.000%
k. On deposit with other regulatory bodies			\$ -		\$ -	0.000%	0.000%
Pledged collateral to FHLB (including assets backing funding agreements)			\$ -		\$ -	0.000%	0.000%
m. Pledged as collateral not captured in other categories			\$ -		\$ -	0.000%	0.000%
n. Other restricted assets			\$ -		\$ -	0.000%	0.000%
o. Total Restricted Assets	\$ -	\$ -	\$ -	\$ -	\$ -	0.000%	0.000%

⁽a) Column 1 divided by Asset Page, Column 1, Line 28

⁽b) Column 5 divided by Asset Page, Column 3, Line 28

Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)

Description of Assets	1 Total Gross (Admitted & Non- admitted) Restricted from Current Year	2 Total Gross (Admitted & Non- admitted) Restricted from Prior Year	Increase/ (Decrease) (1 minus 2)	4 Total Current Year Admitted Restricted	5 Gross (Admitted & Non- admitted) Restricted to Total Assets	Admitted Restricted to Total Admitted Assets
Total (a)	\$ -	\$ -	\$ -	\$ -	0.000%	0.000%

(a) Total Line for Columns 1 through 3 should equal 5L(1)m Columns 1 through 3 respectively and Total Line for Column 4 should equal 5L(1)m Column 5.

3.	Detail of Other Restricted Assets (Contracts That Share Similar	Characteristics	, Such as Reir	surance and D	erivatives, Are	Reported in the	Aggregate)
		1 Total Gross (Admitted & Non- admitted) Restricted from Current	2 Total Gross (Admitted & Non- admitted) Restricted from Prior	3 Increase/ (Decrease)	4 Total Current Year Admitted	5 Gross (Admitted & Non- admitted) Restricted to Total	Admitted Restricted to Total Admitted
	Description of Assets	Year	Year	(1 minus 2)	Restricted	Assets	Assets
	Total (a)	\$ -	\$ -	\$ -	\$ -	0.000%	0.000%

⁽a) Total Line for Columns 1 through 3 should equal 5L(1)n Columns 1 through 3 respectively and Total Line for Column 4 should equal 5L(1)n Column 5.

4. Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements

Collateral Assets	1 Book/Adjusted Carrying Value (BACV)	2 Fair Value	3 % of BACV to Total Assets (Admitted and Nonadmitted)*	4 % of BACV to Total Admitted Assets **
a. Cash, Cash Equivalents and Short-Term Investments			0.000%	0.000%
b. Schedule D, Part 1			0.000%	0.000%
c. Schedule D, Part 2, Section 1			0.000%	0.000%
d. Schedule D, Part 2, Section 2			0.000%	0.000%
e. Schedule B			0.000%	0.000%
f. Schedule A			0.000%	0.000%
g. Schedule BA, Part 1			0.000%	0.000%
h. Schedule DL, Part 1			0.000%	0.000%
i. Other			0.000%	0.000%
j. Total Collateral Assets (a+b+c+d+e+f+g+h+i)	\$ -	\$ -	0.000%	0.000%

2 % of Liability to Total Liabilities * Amount 0.000%

Working Capital Finance Investments Not Applicable

1. Aggregate Working Capital Finance Investments (WCFI) Book/Adjusted Carrying Value by NAIC Designation:

	Gross Asset CY	Non-admitted Asset CY	Net Admitted Asset CY
a. WCFI Designation 1			\$ -
b. WCFI Designation 2			\$ -
c. WCFI Designation 3			\$ -
d. WCFI Designation 4			\$ -
e. WCFI Designation 5			\$ -
f. WCFI Designation 6			\$ -
g. Total	\$ -	\$ -	\$ -

2. Aggregate Maturity Distribution on the Underlying Working Capital Finance Programs

Book/Adjusted Carrying Value

a. Up to 180 Days

b. 181 to 365 Days

c. Total

3. Not Applicable

Offsetting and Netting of Assets and Liabilities Not Applicable

	Gross Amount Recognized	Amount Offset*	Net Amount Presented on Financial Statements
(1) Assets			

* For derivative assets and derivative liabilities, the amount offset shall agree to Schedule DB, Part D, Section 1

		Net Amount Presented on
Gross Amount		Financial
Recognized	Amount Offset*	Statements

^{*} Column 1 divided by Asset Page, Line 26 (Column 1)
** Column 1 divided by Asset Page, Line 26 (Column 3)

k. Recognized Obligation to Return Collateral Asset

^{*} Column 1 divided by Liability Page, Line 24 (Column 3)

(2) Liabilities		

5GI Securities Not Applicable

Investment	Number of 5GI Securities		Aggrega	ite BACV	Aggregate Fair Value		
	Current Year	Prior Year	Current Year	Prior Year	Current Year	Prior Year	
(1) Bonds - AC							
(2) Bonds - FV							
(3) LB&SS - AC							
(4) LB&SS - FV							
(5) Preferred Stock - AC							
(6) Preferred Stock - FV							
(7) Total (1+2+3+4+5+6)	0	0	\$ -	\$ -	\$ -	\$ -	

AC - Amortized Cost FV - Fair Value

Short Sales Not Applicable

(1) Unsettled Short Sale Transactions (Outstanding as of Reporting Date) Fair Value of Short Sales Exceeding (or Fair Value of Short Sales expected to exceed) 3 Settlement Expected to be Settled by Secured Current Fair Value of Securities Sold Expected Unrealized Proceeds Settlement (# of Received Short Gain or Loss Days) Days Borrowing a. Bonds b. Preferred Stock c. Common Stock

XXX

(2) Settled Short Sale Transactions

d. Totals (a+b+c)

	Proceeds Received	Current Fair Value of Securities Sold Short	Realized Gain or Loss on Transaction	Fair Value of Short Sales that Exceeded 3 Settlement Days	Fair Value of Short Sales Settled by Secured Borrowing
Bonds Preferred Stock Common Stock					
d. Totals (a+b+c)	\$ -	\$ -	\$ -	\$ -	\$ -

Prepayment Penalty and Acceleration Fees Not Applicable

General Account

- 1. Number of CUSIPs
- 2. Aggregate Amount of Investment Income
- Reporting Entity's Share of Cash Pool by Asset Type Not Applicable

Percent Share Asset Type

- (1) Cash
- (2) Cash Equivalents
- (3) Short-Term Investments
- (4) Total

NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies A. Not Applicable

В. Not Applicable

NOTE 7 Investment Income

The company earned interest income and realized gains or losses from investments related to the Statutory Trust and on cash balances in bank certificates of deposit

Not Applicable

NOTE 8 Derivative Instruments

- Derivatives under SSAP No. 86—Derivatives (1) Not Applicable

 - (2) Not Applicable
 - (3) Not Applicable
 - (4) Not Applicable
 - (5) Not Applicable
 - (6) Not Applicable
 - (7) Not Applicable
 - (8)

^{*} For derivative assets and derivative liabilities, the amount offset shall agree to Schedule DB, Part D, Section 1

	1. 2021		Fiscal	Year			Derivative Premium Payments Due
	 2. 2022 2023 2024 Thereafter Total Future Settled 	Premiums					\$ -
b.							
	 Prior Year Current Year 			Fu	Undiscounted uture Premium Commitments	Derivative Fair Value With Premium Commitments (Reported on DB)	Derivative Fair Value Excluding Impact of Future Settled Premiums
	under SSAP No. 108— ot Applicable	-Derivative Hedgir	ng Variable Annuity	Guarantees			
	ecognition of gains/loss		ssets and liabilities				
a.	Scheduled Amortization	1				D. f I	D. farmal
			Amortization Year			Deferred Assets	Deferred Liabilities
	1. 2021 2. 2022 3. 2023 4. 2024 5. 2025 6. 2026 7. 2027 8. 2028 9. 2029 10. 2030 11. Total					s -	\$ -
	Total Deferred Balance * Should agree to Colur		e DB, Part E				
	Reconciliation of Amort 1. Prior Year Total Def 2. Current Year Amorti 3. Current Year Deferre 4. Ending Deferred Bal	erred Balance zation d Recognition					\$ -
d.	Open Derivative Remo 1. Total Derivative Fair 2. Change in Fair Valu 3. Change in Fair Value	ved from SSAP N Value Change e Reflected as a	Natural Offset to VI	M21 Liability under S	SSAP No. 108		\$ -
e.	 Other Changes Unrealized Gain / Lo Open Derivative Remo Total Derivative Fair Unrealized Gain / Lo Other Changes 	ved from SSAP N	lo. 86 and Captured	d in Scope of SSAP	No. 108	4)]	\$ -
(3) He	 Fair Value Change A edging Strategies Identi Not Applicable 			No. 108 [1-(2+3)]			\$ -
h	Details of Hedging Stra	ategies Identified :	as No Longer Highly	v Effective			
U .	Unique Identifier	Date Domiciliary State Notified	Amortization (# of Years) 5 or Less	Recognized Deferred Assets	Recognized Deferred Liabilities		
C.	Amortization			<u> </u>		_	-
	Amortizatio	on Year	Recognized Deferred Assets	Recognized Deferred Assets	Accelerated Amortization	Original Amortization	
	1. 2021 2. 2022 3. 2023 4. 2024						

- 6. Total Adjusted Amortization
- d. Not Applicable
- (4) Hedging Strategies Terminated a. Not Applicable

 - b. Details of Hedging Strategies Terminated

Unique Identifier	Date Domiciliary State Notified	Amortization (# of Years) 5 or Less	Recognized Deferred Assets	Recognized Deferred Liabilities

c. Amortization

	Amortization Year	Recognized Deferred Assets	Recognized Deferred Assets	Accelerated Amortization	Original Amortization
1.	2021				
2.	2022				
3.	2023				
4.	2024				
5.	2025				

- 6. Total Adjusted Amortization
- d. Not Applicable

NOTE 9 Income Taxes The Plan has experienced losses in its first two years of operation, and no net income is expected for FY 2021. There are no tax estimates.

A. The components of the net deferred tax asset/(liability) at the end of current period are as follows:

As of End of Current Period 12/31/2020 Change (7) (Col. 1 - 4) Ordinary (8) (Col. 2 - 5) (3) (Col. 1 + 2) Total (6) (Col. 4 + 5) Total (9) (Col. 7 + 8) Total (1) (2) (4) (5) Ordinar (a) Gross Deferred Tax Assets \$ (b) Statutory Valuation Allowance Adjustment (c) Adjusted Gross Deferred Tax Assets (1a - 1b) \$ \$ \$ (d) Deferred Tax Assets Nonadmitted (e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d) \$ (f) Deferred Tax Liabilities (g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)

2.

	As of	End of Current	Period		12/31/2020			Change	
	(1)	(2)	(3) (Col. 1 + 2)	(4)	(5)	(6) (Col. 4 + 5)	(7) (Col. 1 - 4)	(8) (Col. 2 - 5)	(9) (Col. 7 + 8)
	Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total
Admission Calculation Components SSAP No. 101									
(a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks			\$ -			\$ -	\$ -	\$ -	\$ -
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)			\$ -			\$ -	\$ -	\$ -	\$ -
Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date.			\$ -			\$ -	\$ -	\$ -	\$ -
Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	0	0		0	0		0	0	\$ -
(c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.			\$ -			\$ -	\$ -	\$ -	\$ -
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

3.		
	2021	2020

- a. Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount.
- b. Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation $\ln 2(b)2$ Above.

4.

	As of End of	Current Period	12/31/2020		Cha	ange
	(1)	(2)	(3)	(4)	(5) (Col. 1 - 3)	(6) (Col. 2 - 4)
	Ordinary	Capital	Ordinary	Capital	`Ordinary [′]	` Capital ´
Impact of Tax Planning Strategies:						
(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage. 1. Adjusted Gross DTAs amount from Note 9A1 (c)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies					0.000%	0.0009
3. Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies		0.000%	0.000%
---	--	--------	--------

(1) As of End of

Current Period

\$

\$

\$

\$

\$

b. Do the Company's tax-planning strategies include the use of reinsurance?

Yes [] No []

(2) 12/31/2020

\$

\$

\$

\$

\$

\$

\$

\$

\$

(3) (Col. 1 - 2)

\$ \$

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\$

\$

- Not Applicable
- Current income taxes incurred consist of the following major components:
 - 1. Current Income Tax
 - (a) Federal
 - (b) Foreign
 - (c) Subtotal
 - (d) Federal income tax on net capital gains
 - (e) Utilization of capital loss carry-forwards
 - (f) Other
 - (g) Federal and foreign income taxes incurred
 - Deferred Tax Assets:
 - (a) Ordinary:
 - (1) Discounting of unpaid losses
 - (2) Unearned premium reserve
 - (3) Policyholder reserves
 - (4) Investments
 - (5) Deferred acquisition costs
 - (6) Policyholder dividends accrual
 - (7) Fixed Assets
 - (8) Compensation and benefits accrual

 - (9) Pension accrual (10) Receivables - nonadmitted
 - (11) Net operating loss carry-forward
 - (12) Tax credit carry-forward
 - (13) Other (including items <5% of total ordinary tax assets) (99) Subtotal
 - (b) Statutory valuation allowance adjustment
 - (c) Nonadmitted
 - (d) Admitted ordinary deferred tax assets (2a99 2b 2c)
 - (e) Capital:
 - (1) Investments
 - (2) Net capital loss carry-forward
 - (3) Real estate
 - (4) Other (including items <5% of total ordinary tax assets) (99) Subtotal
 - (f) Statutory valuation allowance adjustment
 - (a) Nonadmitted
 - (h) Admitted capital deferred tax assets (2e99 2f 2g)
 - (i) Admitted deferred tax assets (2d + 2h)
 - 3. Deferred Tax Liabilities:
 - (a) Ordinary:
 - (1) Investments
 - (2) Fixed Assets
 - (3) Deferred and uncollected premium
 - (4) Policyholder reserves
 - (5) Other (including items <5% of total ordinary tax liabilities) (99) Subtotal
 - (b) Capital:
 - (1) Investments
 - (2) Real estate
 - (3) Other (including items <5% of total capital tax liabilities) (99) Subtotal
 - (c) Deferred tax liabilities (3a99 + 3b99)
 - 4. Net deferred tax assets/liabilities (2i 3c)
- Not Applicable D.
- Not Applicable
- F. Not Applicable
- Not Applicable G.
- Repatriation Transition Tax (RTT) Η.
- Alternative Minimum Tax (AMT) Credit Not Applicable

Amount

- (1) Gross AMT Credit Recognized as:
 - a. Current year recoverable
 - b. Deferred tax asset (DTA)
- (2) Beginning Balance of AMT Credit Carryforward (3) Amounts Recovered

- (4) Adjustments
- (5) Ending Balance of AMT Credit Carryforward (5=2-3-4)
- (6) Reduction for Sequestration
- (7) Nonadmitted by Reporting Entity
- (8) Reporting Entity Ending Balance (8=5-6-7)

\$

\$

- NOTE 10 Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

 A. On or about October 14, 2021, Reliance Health, Inc. announced that it intended to merge with Commonwealth Care Alliance LLC of Boston, Massachusetts, subject to regulatory approval. This merger would include Reliance HMO, Inc. (the company) as well as Reliance ACO and Reliance Physician Organization. The required Form A has been filed with the Michigan Department of Insurance and Financial Services.
- Details of the transaction have not been finalized as of the date of this filing.
- C. Transactions with related party who are not reported on Schedule Y

(1) Detail of M	(1) Detail of Material Related Party Transactions									
Ref#	Date of Transaction	Name of Related Party	Nature of Relationship	Type of Transaction	Written Agree- ment (Yes/No)	Due Date	Reporting Period Date Amount Due From (To)			

Options for Type of Transaction:

- Loan
- Exchange of Assets or Liabilities (e.g., buys, sells and secured borrowing transactions)
- Management Services
- Cost-Sharing Agreement
- Other Transactions Involving Services
- Guarantee (e.g., guarantees to related parties, on behalf of, and when beneficiary is related party)

(2) Detail of Mate	Prial Related Party Transactions Inv	Olving Services Overview Description	Amount Charged	Amount Based on Allocation of Costs or Market Rates	Amount Charged Modified or Waived (Yes/No)
Total			\$ -	\$ -	
(3) Detail of Mat	erial Related Party Transactions Invition of Transaction	rolving Exchange of Assets and Liabilities	10		•

Have Terms Changed from Preceding Period? Ref# Name of Related Party Overview Description (Yes/No)

b. Assets Received Statement Value of Assets Ref# Name of Related Party Description of Assets Received Received

Assets Transferred Statement Value of Assets Ref# Name of Related Party Transferred **Description of Assets Transferred**

(4) Detail of Amounts Owed To/From a Related Party Net Amount Amount Offset in Aggregate Aggregate Recoverable/ Reporting Period Amount Due From Reporting Period (Amount Due To) (Payable)
Related Party Financial Statement Name of Admitted Ref# Related Party (if qualifying) Recoverable Total XXX

- C. Not Applicable
- Not Applicable
- E. Not Applicable
- Not Applicable

G.	Not Applicable		
Н.	Not Applicable		
I.	Not Applicable		

Not Applicable

Not Applicable

Not Applicable

All SCA Investments

(1) Balance Sh

) Balance Sheet Value (Admitted and Nonadmitted) All SCAs (Except 8)	bi Entities)			
SCA Entity	Percentage of SCA Ownership	Gross Amount	Admitted Amount	Nonadmitted Amount
a. SSAP No. 97 8a Entities				
Total SSAP No. 97 8a Entities	XXX	\$ -	\$ -	\$ -
b. SSAP No. 97 8b(ii) Entities				
Total SSAP No. 97 8b(ii) Entities	XXX	\$ -	\$ -	\$ -
c. SSAP No. 97 8b(iii) Entities				
Total SSAP No. 97 8b(iii) Entities	XXX	-	\$ -	\$ -
LOCADAN, OT OUT A FIRM	1			1
d. SSAP No. 97 8b(iv) Entities				
Total SSAP No. 97 8b(iv) Entities	XXX	\$ -	\$ -	\$ -
e. Total SSAP No. 97 8b Entities (except 8bi entities) (b+c+d)	XXX	\$ -	\$ -	\$ -
f. Aggregate Total (a+ e)	XXX	\$ -	\$ -	\$ -

b. SSAP No. 97 8b(ii) Entities Total SSAP No. 97 8b(iii) Entities XXX XXX XXX XXX XXX XXX XXX XXX XXX X	NAIC Filing Response Information						
Total SSAP No. 97 8a Entities XXX XX			to	Valuation	Response Received	Disallowed Entities Valuation Method, Resubmission	Code **
b. SSAP No. 97 8b(ii) Entities Total SSAP No. 97 8b(iii) Entities XXX XXX XXX XXX XXX XXX XXX XXX XXX X	a. SSAP No. 97 8a Entities						
b. SSAP No. 97 8b(ii) Entities Total SSAP No. 97 8b(iii) Entities XXX XXX XXX XXX XXX XXX XXX XXX XXX X							
Total SSAP No. 97 8b(iii) Entities	Total SSAP No. 97 8a Entities	XXX	XXX	\$ -	XXX	XXX	XXX
Total SSAP No. 97 8b(iii) Entities							
c. SSAP No. 97 8b(iii) Entities XXX	b. SSAP No. 97 8b(ii) Entities						
c. SSAP No. 97 8b(iii) Entities XXX	Total SSAP No. 97 8b(ii) Entities	XXX	XXX	\$ -	XXX	XXX	XXX
Total SSAP No. 97 8b(iii) Entities	, ,	•		•			
d. SSAP No. 97 8b(iv) Entities Total SSAP No. 97 8b(iv) Entities XXX XXX \$ - XXX XXX XXX	c. SSAP No. 97 8b(iii) Entities						
Total SSAP No. 97 8b(iv) Entities XXX XXX \$ - XXX XXX <t< td=""><td>Total SSAP No. 97 8b(iii) Entities</td><td>XXX</td><td>XXX</td><td>\$ -</td><td>XXX</td><td>XXX</td><td>XXX</td></t<>	Total SSAP No. 97 8b(iii) Entities	XXX	XXX	\$ -	XXX	XXX	XXX
Total SSAP No. 97 8b(iv) Entities XXX XXX \$ - XXX XXX <t< td=""><td></td><td>-</td><td></td><td></td><td></td><td>-</td><td></td></t<>		-				-	
e. Total SSAP No. 97 8b Entities (except 8bi entities) (b+c+d) XXX XXX \$ - XXX XXX XXX	d. SSAP No. 97 8b(iv) Entities						
e. Total SSAP No. 97 8b Entities (except 8bi entities) (b+c+d) XXX XXX \$ - XXX XXX XXX	Total SSAP No. 97 8b(iv) Entities	XXX	XXX	\$ -	XXX	XXX	XXX
f. Aggregate Total (a+e) XXX XXX \$ - XXX XXX XXX		XXX	XXX		XXX	XXX	XXX
	f. Aggregate Total (a+e)	XXX	XXX	\$ -	XXX	XXX	XXX

^{*} S1 - Sub-1, S2 - Sub-2 or RDF - Resubmission of Disallowed Filing

Investment in Insurance SCAs

(1) Not Applicable

(2) The monetary effect on net income and surplus as a result of using an accounting practice that differed from NAIC Statutory Accounting Practices and Procedures (NAIC SAP), the amount of the investment in the insurance SCA per audited statutory equity and amount of the investment if the insurance SCA had completed statutory financial statements in accordance with the AP&P Manual.

SCA Entity (Investments in Insurance SCA Entities)	Monetary Effec	ct on NAIC SAP	Amount of Investment		
	Net Income Increase (Decrease)	Surplus Increase (Decrease)	Per Audited Statutory Equity	If the Insurance SCA Had Completed Statutory Financial Statements *	

^{*} Per AP&P Manual (without permitted or prescribed practices)

^{**} I - Immaterial or M - Material

(3) Not Applicable

SCA or SSAP 48 Entity Loss Tracking 2 3 4 5 6 Guaranteed Obligation / Commit-ment Reporting Entity's Share of Net Income Amount of Entity's
Share of
Equity, Including Guarantee Recognized Under Accumulated for Share of Net Income SSAP No. 5R NOTE 11 Debt The company obtained a Paycheck Protection Program loan under the CARES Act in the amount of \$187,500. The company received loan forgiveness under the terms of the program in July 2021, and the amount ceased to be a loan. FHLB (Federal Home Loan Bank) Agreements (1) Not Applicable (2) FHLB Capital Stock a. Aggregate Totals Total 1. Current Year (a) Membership Stock - Class A (b) Membership Stock - Class B (c) Activity Stock (d) Excess Stock (e) Aggregate Total (a+b+c+d) (f) Actual or estimated Borrowing Capacity as Determined by the Insurer 2. Prior Year-end (a) Membership Stock - Class A (b) Membership Stock - Class B (c) Activity Stock (d) Excess Stock (e) Aggregate Total (a+b+c+d) (f) Actual or estimated Borrowing Capacity as Determined by the Insurer 11B(2)a1(f) should be equal to or greater than 11B(4)a1(d) 11B(2)a2(f) should be equal to or greater than 11B(4)a2(d) b. Membership Stock (Class A and B) Eligible and Not Eligible for Redemption 2 Eligible for Redemption 1 3 4 5 6 6 Months to Current Year Total Not Eligible for Less Than 1 to Less Than Less Than (2+3+4+5+6) 1 Year 3 to 5 Years Redemption 3 Years Membership Stock 1. Class A \$ 2. Class B \$ 11B(2)b1 Current Year Total (Column 1) should equal 11B(2)a1(a) Total (Column 1) 11B(2)b2 Current Year Total (Column 1) should equal 11B(2)a1(b) Total (Column 1) (3) Collateral Pledged to FHLB a. Amount Pledged as of Reporting Date 2 Aggregate Total Fair Value Carrying Value Borrowing 1. Current Year Total Collateral Pledged 2. Prior Year-end Total Collateral Pledged 11B(3)a1 (Columns 1, 2 and 3) should be equal to or less than 11B(3)b1 (Columns 1, 2 and 3 respectively) 11B(3)a2 (Columns 1, 2 and 3) should be equal to or less than 11B(3)b2 (Columns 1, 2 and 3 respectively) 11B(3)a3 (Columns 1, 2 and 3) should be equal to or less than 11B(3)b3 (Columns 1, 2 and 3 respectively) 11B(3)a4 (Columns 1, 2 and 3) should be equal to or less than 11B(3)b4 (Columns 1, 2 and 3 respectively) b. Maximum Amount Pledged During Reporting Period 2 3 Amount Borrowed at Time of Maximum Fair Value Carrying Value Collateral 1. Current Year Total Maximum Collateral Pledged 2. Prior Year-end Total Maximum Collateral Pledged

(4) Borrowing from FHLB

Current Year
 (a) Debt

a. Amount as of Reporting Date

Funding
Agreements
Reserves
Total Established

(b) Funding Agreements (c) Other			XXX	
(d) Aggregate Total (a+b+c)	\$	- \$	-	•
2. Prior Year end				
(a) Debt			XXX	
(b) Funding Agreements				
(c) Other			XXX	
(d) Aggregate Total (a+b+c)	\$	- \$	-	
Maximum Amount During Reporting Period (Current Year)	Т	otal		
1. Debt				
2. Funding Agreements				
3. Other				
4. Aggregate Total (Lines 1+2+3)	\$	-		
11P(4)b4 (Columns 1, 2 and 3) should be equal to or gre	nator than 11P(4)a1(d)	(Columns 1 2	and 3 room	octivoly

 $11B(4)b4 \ (Columns\ 1,\ 2\ and\ 3)\ should\ be\ equal\ to\ or\ greater\ than\ 11B(4)a1(d)\ (Columns\ 1,\ 2\ and\ 3\ respectively)$

c. FHLB - Prepayment Obligations

Does the company have prepayment obligations under the following arrangements (YES/NO)?

1. Debt

b.

- 2. Funding Agreements
- 3. Other

NOTE 12 Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

Defined Benefit Plan

The company did not create or maintain a defined benefit plan during this quarter.

- (1) Change in benefit obligation

a. Pension Benefits													
a. Perision beliefits													
				2021	Overt	unded	2020		202		erfunded	2020	
				2021			2020		202	<u> </u>		2020	
Benefit obligation at beginning of year			\$		-			;	\$	_			
2. Service cost													
3. Interest cost													
4. Contribution by plan participants													
Actuarial gain (loss)													
Foreign currency exchange rate change	jes												
7. Benefits paid													
8. Plan amendments	urtailmanta a	ottlomonto											
Business combinations, divestitures, c and special termination benefits	curtaiiments, s	ememens	'										
10. Benefit obligation at end of year			\$		-	\$		- :	\$	-	\$		-
b. Postretirement Benefits													
b. Postretirement benefits					Overf	unded				Unde	erfunded		
				2021	Overn	unueu	2020		202		riunueu	2020	
										•			
1. Benefit obligation at beginning of year			\$		-			;	\$	-			
Service cost													
3. Interest cost													
Contribution by plan participants Actuarial gain (leas)													
5. Actuarial gain (loss)6. Foreign currency exchange rate chang	100												
Benefits paid	,00												
8. Plan amendments													
9. Business combinations, divestitures, of	curtailments, s	ettlements	i										
and special termination benefits			Φ.			•			•		•		
10. Benefit obligation at end of year			\$		-	\$		- ;	\$	-	\$		-
c. Special or Contractual Benefits Per SSAF	P No. 11												
					Overf	unded					erfunded		
				2021			2020		202	21		2020	
Benefit obligation at beginning of year			\$		-			;	\$	-			
2. Service cost													
Interest cost													
4. Contribution by plan participants													
5. Actuarial gain (loss)													
 Foreign currency exchange rate chang Benefits paid 	jes												
Plan amendments													
9. Business combinations, divestitures, of	curtailments, s	ettlements	i										
and special termination benefits													
10. Benefit obligation at end of year			\$		-	\$		- :	\$	-	\$		-
		Pension			F	Postreti	irement		Spe	ecial or C	Contractu	ual Bene	fits
		Benefits				Ben	efits				SSAP No		
) Channe in also assets	2021		2020		2021		20	20		2021		2020	
) Change in plan assets a. Fair value of plan assets at beginning													
of year	\$	-		\$		-			\$		-		
				•									

() () () () () ()	D. Actual return on plan assets C. Foreign currency exchange rate changes D. Reporting entity contribution Plan participants' contributions Benefits paid Business combinations, divestitures and settlements Pair value of plan assets at end of year	\$	- \$		\$	- \$		\$ -	\$ -
	unded status	Ψ	- ψ	-	·	- Ψ n Benefits	-	Postretireme	
ŧ	a. Components: 1. Prepaid benefit costs 2. Overfunded plan assets 3. Accrued benefit costs 4. Liability for pension benefits				2021	2020		2021	2020
	b. Assets and liabilities recognized: 1. Assets (nonadmitted) 2. Liabilities recognized c. Unrecognized liabilities								
		2021	Pension Benefits	2020	2021	Postretirement Benefits	020		ntractual Benefits SAP No. 11 2020
6 0 0 6 1	Components of net periodic benefit cost a. Service cost b. Interest cost c. Expected return on plan assets d. Transition asset or obligation e. Gains and losses f. Prior service cost or credit g. Gain or loss recognized due to a settlement or curtailment h. Total net periodic benefit cost	\$	- \$	-	\$	- \$	-	\$ -	\$ -
(5) A	amounts in unassigned funds (surplus) re	ecognized as o	components			st n Benefits 2020		Postretireme	ent Benefits 2020
 	 a. Items not yet recognized as a component of year b. Net transition asset or obligation recognice. c. Net prior service cost or credit arising of the prior service cost or credit recognize. d. Net gain and loss arising during the performance of the performance of	nized luring the perion red riod	od	\$	-	\$	- \$	-	\$ -
(6) A	amounts in unassigned funds (surplus) th	at have not y	et been rec			net periodic ber n Benefits 2020	nefit cost	Postretireme	ent Benefits 2020
ŀ	a. Net transition asset or obligation b. Net prior service cost or credit c. Net recognized gains and losses				2021			2021	2020
á	Veighted-average assumptions used to c a. Weighted average discount rate b. Expected long-term rate of return on pl		periodic bei	nefit cost as of	the end of o	current period:		2021	2020
	c. Rate of compensation increase d. Interest crediting rates (for cash balan	ce plans and	other plans	with promised	interest cred	diting rates)			
f	Veighted average assumptions used to d e. Weighted average discount rate f. Rate of compensation increase g. Interest crediting rates (for cash balan			-		·		2021	2020
	Not Applicable	oo piano ana	outer plane	mar promised	interest erec	aning ratios,			
(9) 1	Not Applicable								
	The following estimated future payments aid in the years indicated:	s, which reflec	et expected	future service,	as appropri	ate, are expected	d to		
i (a. 2022 b. 2023 c. 2024 d. 2025 e. 2026 f. 2027 through 20xx								Amount
(11)	Not Applicable								
(12)	Not Applicable								
(13)	Not Applicable								

(14) Not Applicable

- (15) Not Applicable
- (16) Not Applicable
- (17) Not Applicable
- (18) Not Applicable
- Not Applicable В.
- C. The fair value of each class of plan assets

(1) Fair Value Measurements of Plan Assets at Reporting Date

Description for each class of plan assets	(Level 1)	(Level 2)	(Level 3)	Total
Total Plan Assets	\$ -	\$ -	\$ -	\$ -

- (2) Not Applicable
- Not Applicable D.
- E. Defined Contribution Plan Not Applicable
- Multiemployer Plans Not Applicable
- Consolidated/Holding Company Plans G. Not Applicable
- Postemployment Benefits and Compensated Absences Not Applicable Н.
- Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17) Not Applicable 1.

NOTE 13 Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations A. Not Applicable

- Not Applicable
- C. Not Applicable
- D. Not Applicable
- E. Not Applicable
- Not Applicable Not Applicable F.
- G.
- Not Applicable H. Not Applicable
- The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is J,

The Compa	ly issued the following	ng sarpias aepentare	s or similar obligations:				
1	2	3	4	5	6	7	8
				Is Surplus Note			
				Holder a			Unapproved
				Related		Carrying Value	Interest
Item			Original Issue	Party	Carrying Value of	of Note	And/Or
Number	Date Issued	Interest Rate	Amount of Note	(Y/N)	Note Prior Year	Current Year*	Principal
Total	XXX	XXX	\$ -	XXX	\$ -	\$ -	\$ -

^{*} Total should agree with Page 3, Line 29.

1 Item Number	9 Current Year Interest Expense Recognized	10 Life-To-Date Interest Expense Recognized	11 Current Year Interest Offset Percentage (not including amounts paid to a 3rd party liquidity provider)	12 Current Year Principal Paid	13 Life-To-Date Principal Paid	14 Date of Maturity
Total	\$ -	\$ -	XXX	\$ -	\$ -	XXX

1 Item	Are Surplus Note Payments Contractually Linked? (Y/N)	Surplus Note Payments Subject to Administrative Offsetting Provisions? (Y/N)	17 Were Surplus Note Proceeds Used to Purchase an Asset Directly From the Holder of the Surplus Note? (Y/N)	Is Asset Issuer a Related Party (Y/N)	19 Type of Assets Received Upon Issuance
Total	XXX	XXX	XXX	XXX	XXX

1 Item Number	20 Principal Amount of Assets Received Upon Issuance	21 Book/Adjusted Carry Value of Assets	22 Is Liquidity Source a Related Party to the Surplus Note Issuer? (Y/N)
Total	\$ -	\$ -	XXX

L. The impact of any restatement due to prior quasi-reorganizations is as follows:

	Change in Gross
	Paid-in and
Change in Year	Contributed
Surplus	Surplus

M. Not Applicable

B.

(3)

a. Discount Rate Applied

NOTE 14 Liabilities, Contingencies and Assessments

A. Contingent Commitments
Not Applicable

(1) Total contingent liabilities:

(2)				
(1)	Liability recognition of guarantee. (Include amount recognized at inception. If no initial recognition,	(3)	(4) Maximum potential amount of future payments (undiscounted) the guarantor could be required to make under the guarantee. If unable to	(5)
Nature and circumstances of guarantee and key attributes, including date and duration of agreement	document exception allowed under SSAP No. 5R.)	Ultimate financial statement impact if action under the guarantee is required	develop an estimate, this should be specifically noted.	Current status of payment or performance risk of guarantee. Also provide additional discussion as warranted
Total	& -	XXX	4 .	XXX

(3) Amount a. Aggregate Maximum Potential of Future Payments of All Guarantees (undiscounted) the guarantor could be required to make under guarantees. (Should equal total of Column 4 for (2) above.) b. Current Liability Recognized in F/S: 1. Noncontingent Liabilities 2. Contingent Liabilities c. Ultimate Financial Statement Impact if action under the guarantee is required: 1. Investments in SCA 2. Joint Venture 3. Dividends to Stockholders (capital contribution) 4. Expense 5. Other 6. Total (Should equal (3)a.) Assessments (1) Not Applicable (2) a. Assets recognized from paid and accrued premium tax offsets and policy surcharges prior year-end b. Decreases current period: c. Increases current period: d. Assets recognized from paid and accrued premium tax offsets and policy surcharges current year-end \$

	b. The Undiscounted and Discounted Amount of the Guarant	ty Fund Ass				olvency		
	Name of the Insolvency Guaranty Fund Assessn Undiscounted Disco					Rel Undiscounte	ated Assets	counted
			Oil	aiscouritea	Discounted	Ondiscounte	u Dis	counted
	c. Number of Jurisdictions, Ranges of Years Used to Discour	at and Waig	ubtod A	vorago Numb	oor of Voors of the	Discounting Time	o Poriod for	Payables and
	Recoverables by Insolvency	it and weig	inteu A	werage Numb	er or rears or the	Discounting Time	e Fellou loi	rayables and
	Name of the Insolvency			Payables			Recoverable	es T
					Weighted			Weighted
		Numbe	er of	Range of	Average Number of	Number of	Range of	Average Number of
		Jurisdic		Years	Years	Jurisdictions	Years	Years
		1			l	ı		ı
C.	Gain Contingencies Not Applicable							
D.	Claims related extra contractual obligations and bad faith losses stemm	ning from la	wsuits				D: .	
	(1) The company paid the following amounts in the reporting perion	nd to settle	claims	rolated extra	contractual obliga		Direct	_
	or bad faith claims stemming from lawsuits	od to settle	Ciairis	related extra	Contractual obliga	auons		
	(2) Number of claims where amounts were paid to settle claims re	elated extra	contra	actual obligation	ons or bad faith cl	aims		
	resulting from lawsuits during the reporting period (3) Indicate whether claim count information is disclosed per claim	n or per clai	mant					
E.	Joint and Several Liabilities							
	Not Applicable							
F.	All Other Contingencies Not Applicable							
A.	TE 15 Leases Lessee Operating Lease: (1) Not Applicable							
	(2) a. January 1, 2021, the minimum aggregate rental commitmen	nts are as fo	ollows:					
								Operating Leases
	1. 2021							
	2. 2022 3. 2023							
	4. 2024							
	5. 2025 6. Total							
	(3) Not Applicable							
В.	Lessor Leases (1) Not Applicable							
	c. Future minimum lease payment receivables under noncanc	elable leasi	ng arra	angements as	of the end of cur	rent period are as	s follows:	
				g				Operating
	4.0004							Leases
	1. 2021 2. 2022							
	3. 2023							
	4. 2024 5. 2025							
	6. Total							
	(Not Applicable							
	(2) Leveraged Leases Not Applicable							
	 b. The Company's investment in leveraged leases relates to leveraged leases as of the end of current period and Decemb 	equipment per 31, 2020	used were	primarily in the	e transportation ir ow:			
	Income from leveraged leases before income tax including	a investmer	nt tax o	redit		202	1	2020
	Less current income tax							
	3. Net income from leverage leases					\$	-	\$ -
	c. The components of the investment in leveraged leases as	of the end	of cur	rent period an	nd December 31, 2	2020 were as sho		2020
	Lease contracts receivable (net of principal and interest o Estimated residual value of leased assets	n non-recou	urse fir	nancing)				
	Unearned and deferred income Investment in leveraged leases							
	Deferred income taxes related to leveraged leases							
	Net investment in leveraged leases					\$	-	\$ -

(1) T	The table below summarizes the face amount of the Company's financial	LIABIL	ITIES			
		ASSI 2021	2020	2021	2020	
	a. Swaps b. Futures c. Options d. Total	\$ -	\$ -	\$ -	\$ -	
(2)	Not Applicable					
(3)	Not Applicable					
(4)	Not Applicable					
NOTE 17 Sale A. Not Applic	e, Transfer and Servicing of Financial Assets and Extinguishments o able	f Liabilities				

Not Applicable В.

Wash Sales

(1) Not Applicable

(2) The details by NAIC designation 3 or below, or unrated of securities sold during the current quarter and reacquired within 30 days of the sale date are:

			Book Value	Cost of	
	NAIC	Number of	of	Securities	
Description	Designation	Transactions	Securities Sold	Repurchased	Gain/(Loss)

NOTE 18 Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans Not Applicable

ASO Plans:
The gain from operations from Administrative Services Only (ASO) uninsured plans and the uninsured portion of partially insured plans was as follows during 2021:

	ASO Uninsured Plans	i	Uninsul Portion Partially In Plans	of sured	Tota	al ASO
a. Net reimbursement for administrative Expenses (including administrative fees) in excess of actual expenses					\$	_
b. Total net other income or expenses (including interest paid to or received from plans)					\$	_
c. Net gain or (loss) from operations	\$	-	\$	-	\$	-
d. Total claim payment volume					\$	-

ASC Plans:

The gain from operations from Administrative Services Contract (ASC) uninsured plans and the uninsured portion of partially insured plans was as follows during 2021:

ASC Uninsured Plans	i	Uninsured Portion of Partially Insure Plans		al ASC
			\$	-
			\$	-
			\$	-
			\$	-
\$	-	\$	- \$	-
	Uninsured	Uninsured	ASC Portion of Uninsured Partially Insure	ASC Portion of Uninsured Partially Insured

Medicare or Similarly Structured Cost Based Reimbursement Contract

NOTE 19 Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

Not Applicable

Name and Address of Managing General Agent or Third Party Administrator	FEIN NUMBER	Exclusive Contract	Types of Business Written	Type of Authority Granted	Total Direct Premiums Written/ Produced By
Total	XXX	XXX	XXX	XXX	\$ -

C - Claims Payment

CA - Claims Adjustment R - Reinsurance Ceding

B - Binding Authority
P - Premium Collection

U - Underwriting

NOTE 20 Fair Value Measurements Not Applicable

(1) Fair Value Measurements at Benerting Date

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value					

Total assets at fair value/NAV	\$	- \$	- \$	- \$ -	\$ -
Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
b. Liabilities at fair value					
Total liabilities at fair value	\$	- \$	- \$	- \$ -	\$ -

(2) Fair Value Measurements in (Level 3) of the Fair Value hierarchy Total gains and (losses) included in Total gains and (losses) included in Ending Balance for Current Quarter End Ending Balance as of Prior Quarter Transfers Transfers into out of Description Net Income Surplus Total Assets

Description	Ending Balance as of Prior Quarter End	Transfers into Level 3	Transfers out of Level 3	Total gains and (losses) included in Net Income	Total gains and (losses) included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance for Current Quarter End
b. Liabilities										
Total Liabilities	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

- (3) Not Applicable
- (4) Not Applicable
- (5) Not Applicable
- Not Applicable

Aggregate fair value for all financial instruments and the level within the fair value hierarchy in which the fair value measurements in their entirety fall C. Net Asset Value (NAV) Aggregate Fair Value Type of Financial Not Practicable Admitted Assets (Level 2) (Level 3) Instrument (Level 1) (Carrying Value)

Not Practicable to Estimate Fair Value

•••					
	Type or Class of Financial Instrument	Carrying Value	Effective Interest Rate	Maturity Date	Explanation

E. Not Applicable

NOTE 21 Other Items

Unusual or Infrequent Items Not Applicable

- В. Troubled Debt Restructuring: Debtors Not Applicable
- C. Other Disclosures Not Applicable
- D. **Business Interruption Insurance Recoveries** Not Applicable
- E. State Transferable and Non-transferable Tax Credits

(1) Carrying Value of Transferable and Non-transferable State Tax Credits Gross of any Related Tax Liabilities and Total Unused Transferable and Non-transferable State Tax Credits by State and in Total

Description of State Transferable and Non-transferable Tax Credits	State	Carrying Value	Unused Amount
21E1999 - Total		\$ -	s -

- (2) Not Applicable
- (3) Not Applicable
- (4) State Tax Credits Admitted and Nonadmitted

Total Admitted Total Nonadmitted a. Transferable b. Non-transferable

- Subprime Mortgage Related Risk Exposure
 - (1) Not Applicable
 - (2) Direct exposure through investments in subprime mortgage loans.

	Book/Adjusted Carrying Value (excluding interest)	Fair Value	Value of Land and Buildings	Other-Than- Temporary Impairment Losses Recognized	Default Rate
a. Mortgages in the process of foreclosure					
b. Mortgages in good standing					
c. Mortgages with restructure terms					
d. Total	\$ -	\$ -	\$ -	\$ -	XXX

(3) Direct exposure through other investments.

5) Shoot expectate an edgit date: invectance.				
	Actual Cost	Book/Adjusted Carrying Value (excluding interest)	Fair Value	Other-Than- Temporary Impairment Losses Recognized
a. Residential mortgage backed securities				
b. Commercial mortgage backed securities				
c. Collateralized debt obligations				
d. Structured securities				
e. Equity investment in SCAs *				
f. Other assets				
g. Total	\$ -	\$ -	\$ -	\$ -

^{*} These investments comprise

(4) Underwriting exposure to subprime mortgage risk through Mortgage Guaranty or Financial Guaranty insurance coverage

	Losses Paid in the Current Year	Losses Incurred in the Current Year	Case Reserves at End of Current Period	IBNR Reserves at End of Current Period
a. Mortgage Guaranty Coverage				
b. Financial Guaranty Coverage				
•				

	Losses Paid in the Current Year	Losses Incurred in the Current Year	Case Reserves at End of Current Period	IBNR Reserves at End of Current Period
c. Other Lines (specify):				
d. Total	\$ -	\$ -	\$ -	\$ -

Retained Assets
(1) Unzutreffend (Not Applicable)

(2) In Force As of End of Current Year As of End of Prior Year a. Up to and including 12 Months b. 13 to 24 Months c. 25 to 36 Months d. 37 to 48 Months e. Equity investment in SCAs * f. 49 to 60 Months

	Indiv	idual	Gro	up
	Number	Balance/ Amount	Number	Balance/ Amount
Number/balance of retained asset accounts at the beginning of the year	0	\$ -	0	\$
Number/amount of retained asset accounts issued/added during the year				
c. Investment earnings credited to retained asset accounts during the year	XXX		XXX	
d. Fees and other charges assessed to retained asset account during the year	xxx		xxx	
e. Number/amount of retained asset accounts transferred to state unclaimed property funds during the year				
f. Number/amount of retained asset accounts closed/withdrawn during the year				
g. Number/balance of retained asset accounts at the end of the year (q = a + b + c - d - e - f)	0	\$ -	0	\$

Insurance-Linked Securities (ILS) Contracts

	Number of Outstanding ILS Contracts	Aggregate Maximum Proceeds
Management of Risk Related To:		
(1) Directly-Written Insurance Risks		
a. ILS Contracts as Issuer		
b. ILS Contracts as Ceding Insurer		
c. ILS Contracts as Counterparty		
(2) Assumed Insurance Risks		
a. ILS Contracts as Issuer		
b. ILS Contracts as Ceding Insurer		
c. ILS Contracts as Counterparty		

The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy

of the companies invested assets.

			NOTES TO	O FINA	NCIAL STA	TEMENTS		
	(1)	Amount of admitted balar	nce that could be realized t	from an investn	nent vehicle			
		Percentage Bonds						
		Percentage Stocks						
		Percentage Mortgage Loa	ans					
		Percentage Real Estate	ort Torm Investments					
		Percentage Cash and Sh Percentage Derivatives	on-Term investments					
		Percentage Other Investe	ed Assets					
	(0)	Toroundge Other invoca	54 / 100010					
		ents Subsequent cable						
1100		e II - Nonrecognized Subs	sequent Events:					
						Current Year	Prior Year	_
		 A. Did the reporting en subject to Section 9010 	itity write accident and heal 0 of the Federal Affordable	th insurance pr Care Act (YES	emium that is /NO)?			
			nt payable for the upcoming	year				
		C. ACA fee assessmer	•	ant				
			oject to ACA 9010 assessm tal before surplus adjustme					
		(Five-Year Historical	· ·	111				
		E Total Adjusted Capit	tal after curplus adjustment			¢		
		•	tal after surplus adjustment Line 14 minus 22B above)			\$ -		
		G. Authorized Control I	evel					
		(Five-Year Historical						
		H Would reporting the	ACA assessment as of Do	oc 31 2020 hav	o triggered an			
		RBC action level (YES	ACA assessment as of De (NO)?	6. 31, 2020 Ha	ve inggered an			
		nsurance						
		einsurance Report cable						
B. Und	collect	tible Reinsurance						
	(1)	The Company has writter	n off in the current year rein	nsurance balan	ces due from the companie	es listed below, the amount of	f:	
		That is reflected as:						
	a. (Claims incurred						
	b. (Claims adjustment expens	es incurred					
	c. F	remiums earned						
	d. C	Other						
	۵			Co	mpany			Amount
	e.			<u> </u>	прапу			Amount
C. Cor	nmuta	ation of Reinsurance Refle	ected in Income and Expen	ses.				
			·		a result of commutation of	reinsurance with the compar	nies listed	
		below, amounts that are i		ourrorn your ac	a room or communication or	Tomodranios man and compan	noo notou	
	(1)	Losses incurred						
	(2)	Loss adjustment expense	es incurred					
	(3)	Premiums earned						
	(4)	Other						
	(5)			Co	mpany			Amount
	(0)				припу			rundunt
D. Cer	tified	Reinsurer Rating Downgra	aded or Status Subject to F	Revocation				
	(1)	Reporting Entity Ceding to	o Certified Reinsurer Whos	se Rating Was	Downgraded or Status Sub	ject to Revocation		
	١	Name of Certified Reinsurer	Relationship to Reporting	Date of	Jurisdiction of	Collateral Percentage	Net Obligation	Collateral
			Entity	Action	Action	Requirement	Subject to Collateral	Required (but not received)
						F. ()	-	

Name of Certified Reinsurer	Relationship to Reporting Entity	Date of Action	Jurisdiction of Action		Collateral Percentage Requirement		Collateral Required (but not received)
				Before	After		

(2) Reporting Entity's Certified Reinsurer Rating Downgraded or Status Subject to Revocation

Date of Action Action Requirement Subject to Revocation

Requirement Subject to Collateral Required (but not yet Funded) Before After

E. Reinsurance Credit Not Applicable

NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination A. Not Applicable

- B. Not Applicable
- Not Applicable
- Medical loss ratio rebates required pursuant to the Public Health Service Act.

NOTES TO FINANCIAL STATEMENTS

	1		2		3		4 Oth	or.	5
			mall Gro		arge Gro		Categorie	es with	
	Individua	l	Employe	r	Employe	ſ	Reba	tes	Total
Prior Reporting Year									
(1) Medical loss ratio rebates incurred	\$	-	\$	-	\$	-	\$	-	\$ -
(2) Medical loss ratio rebates paid	\$	-	\$	-	\$	-	\$	-	\$ -
(3) Medical loss ratio rebates unpaid	\$	-	\$	-	\$	-	\$	-	\$ -
(4) Plus reinsurance assumed amounts	XXX		XXX		XXX		XXX	(
(5) Less reinsurance ceded amounts	XXX		XXX		XXX		XXX	(
(6) Rebates unpaid net of reinsurance	XXX		XXX		XXX		XXX	<	\$ -
Current Reporting Year-to-Date									
(7) Medical loss ratio rebates incurred	\$	-	\$	-	\$	-	\$	-	\$ -
(8) Medical loss ratio rebates paid									\$ -
(9) Medical loss ratio rebates unpaid									\$ -
(10) Plus reinsurance assumed amounts	XXX		XXX		XXX		XXX	<	
(11) Less reinsurance ceded amounts	XXX		XXX		XXX		XXX	<	
(12) Rebates unpaid net of reinsurance	XXX		XXX		XXX		XXX	<	\$ -

- Risk Sharing Provisions of the Affordable Care Act E.
 - (1) Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions (YES/NO)?

Yes [] No []

(2) Impact of Risk Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Current Year

a. Permanent ACA Risk Adjustment Program

Assets

- 1. Premium adjustments receivable due to ACA Risk Adjustment (including high risk pool payments) Liabilities
 - 2. Risk adjustment user fees payable for ACA Risk Adjustment
 - 3. Premium adjustments payable due to ACA Risk Adjustment (including high risk pool premium)

Operations (Revenue & Expense)

- 4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment
- 5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)
- b. Transitional ACA Reinsurance Program

- 1. Amounts recoverable for claims paid due to ACA Reinsurance
- 2. Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability)
- 3. Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance

Liabilities

- 4. Liabilities for contributions payable due to ACA Reinsurance not reported as ceded premium
- 5. Ceded reinsurance premiums payable due to ACA Reinsurance
- 6. Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance

Operations (Revenue & Expense)

- 7. Ceded reinsurance premiums due to ACA Reinsurance
- 8. Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments
- 9. ACA Reinsurance contributions not reported as ceded premium
- c. Temporary ACA Risk Corridors Program

- 1. Accrued retrospective premium due to ACA Risk Corridors
- Liabilities
 - 2. Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors

Operations (Revenue & Expense)

- 3. Effect of ACA Risk Corridors on net premium income (paid/received)
- 4. Effect of ACA Risk Corridors on change in reserves for rate credits

(3) Roll forward of prior year ACA risk sharing provisions for the following asset (gross of any nonadmission) and liability balances along with the reasons for adjustments to prior year balance.

Accrued During the Prior Year on Received or Paid as of the Current Year on Unsettled Balances as of Adjustments the Reporting Date Business Written Before December 31 Business Written Before December 31 Accrued Accrued Balance Balance of the Prior Year of the Prior Year Less Less from from Prior Years Payments (Col 1 - 3) Payments (Col 2 - 4) Prior Year Balances Prior Year Balances Prior Years (Col 1-3+7) (Col 2-4+8) 1 2 3 4 5 6 8 9 10 Payable Payable Receivable Payable Receivable Receivable Receivable Payable Ref Receivable Payable a. Permanent ACA Risk Premium adjustments receivable (including high risk pool payments) Premium adjustments (payable) (including high risk pool premium) 3. Subtotal ACA Permanent Risk Adjustment Program \$ \$ \$ \$ \$ b. Transitional ACA Reinsurance Program 1. Amounts recoverable fo С claims paid 2. Amounts recoverable for claims unpaid (contra iability) D 3. Amounts receivable relating to uninsured Ε tributions payable due to ACA Reinsurance - not reported as ceded remium

NOTES TO FINANCIAL STATEMENTS

5. Ceded reinsurance premiums payable					\$ -		\$ -	I			G	\$ -	.	\$ _
6. Liability for amounts held under uninsured plans					\$ -		\$ -				Н	\$ -	.	\$ -
7. Subtotal ACA Transitional Reinsurance Program	\$ _	\$ _	\$ _	\$ -	\$ -	-	\$ -	9	\$ -	\$ -		\$ -		\$ _
c. Temporary ACA Risk Corridors Program														
Accrued retrospective premium					\$ -		\$ -				ı	\$ -		\$ -
2. Reserve for rate credits or policy experience rating refunds					\$ -	-	\$ -				J	\$ -		\$ _
Subtotal ACA Risk Corridors Program	\$ -	\$ -	\$ -	\$ -	\$ -		\$ -	9	\$ -	\$ -		\$ -	.	\$ -
d. Total for ACA Risk Sharing Provisions	\$ _	\$ _	\$ _	\$ -	\$.		\$ -	9	\$ -	\$ -		\$ -		\$ _

Explanations of Adjustments A.	
В.	
C.	
D.	
E.	
F.	
G.	
Н.	
l.	

(4) Roll-Forward of Risk Corridors Asset and Liability Balances by Program Benefit Year

(4) Roll-Forward of Risk	Corridors Ass	et and Liabili	ity Balances b	y Program E	Benefit Year						
		d During r Year on	Received o	r Paid as of nt Year on	Differ	ences	Ad	djustments			alances as of orting Date
		Before December 31 of the Prior Year		s Written cember 31 rior Year	(Col 1 - 3) (Col 2 - 4) E		To To Prior Year Balances Balances			Cumulative Balance from Prior Years (Col 1-3+7)	Cumulative Balance from Prior Years (Col 2-4+8)
	1	2	3	4	5	6	7	8		9	10
	Receivable	Payable	Receivable	Payable	Receivable	Payable	Receivable	Payable	Ref	Receivable	Payable
a. 2014 1. Accrued retrospective premium					\$ -	\$ -			Α	\$ -	\$ -
Reserve for rate credits or policy experience rating refunds b. 2015					\$ -	\$ -			В	\$ -	\$ -
Accrued retrospective premium					\$ -	\$ -			С	\$ -	\$ -
Reserve for rate credits or policy experience rating refunds c. 2016					\$ -	\$ -			D	\$ -	\$ -
Accrued retrospective premium					\$ -	\$ -			Е	\$ -	\$ -
2. Reserve for rate credits or policy experience rating refunds					\$ -	\$ -			F	\$ -	\$ -
d. Total for Risk Corridors	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		\$ -	\$ -

Explanations of Adjustments

A.
B.
C.
D.
E.

24E(4)d (Columns 1 through 10) should equal 24E(3)c3 (Column 1 through 10 respectively)

(5) ACA Risk Corridors Receivable as of Reporting Date

(5) ACA Risk Corridors Receivable as of Reporting Date	:					
	1	2	3	4 Asset	5	6
	Estimated Amount to be	Non-Accrued Amounts for		Balance		
	Filed or Final	Impairment or	Amounts	(Gross of Non-		
	Amount Filed	Other	received from	admissions)	Non-admitted	Net Admitted
Risk Corridors Program Year	with CMS	Reasons	CMS	(1-2-3)	Amount	Asset (4 - 5)
a. 2014				\$ -		\$ -
b. 2015				\$ -		\$ -
c. 2016				\$ -		\$ -

NOTES TO FINANCIAL STATEMENTS

d. Total (a + b + c) \$ - \\$ - \\$ - \\$ -

24E(5)d (Column 4) should equal 24E(3)c1 (Column 9) 24E(5)d (Column 6) should equal 24E(2)c1

NOTE 25 Change in Incurred Claims and Claim Adjustment Expenses

Not Applicable

NOTE 26 Intercompany Pooling Arrangements

Not Applicable

NOTE 27 Structured Settlements

Not Applicable

NOTE 28 Health Care Receivables

Pharmaceutical Rebate Receivable Estimated Actual Rebates Pharmacy Rebates as Reported on Financial Pharmacy Rebates as Billed or Otherwise Actual Rebates Received Within 91 to 180 Days of Received More Than 180 Days Actual Rebates Received Within After Statements Date Confirmed 90 Days of Billing Billing Billing

Risk-Sharing Receival	oles	Not App	licable						
Calendar Year	Evaluation Period Year Ending	Risk Sharing Receivable as Estimated in the Prior Year	Receivable	Risk Sharing Receivable Billed	Risk Sharing Receivable Not Yet Billed	Received in	Actual Risk Sharing Amounts Received First Year Subsequent	Actual Risk Sharing Amounts Received Second Year Subsequent	Actual Risk Sharing Amounts Received - All Other

NOTE 29 Participating Policies

Not Applicable

В.

NOTE 30 Premium Deficiency Reserves

- 1. A liability of aproximately \$4.2M was recorded in the December 31, 2020 stateme \$ 1,038,540
- 2. The most recent actuarial review was completed on March 17, 2021. 12/31/2020
- 3. Was anticipated investment income utilized in the calculation? $Yes [X] \ No \ []$

NOTE 31 Anticipated Salvage and Subrogation

Not Applicable

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

2.1 Has ar reporting the reporting series of the repor	properties and the report been filed with the domiciliary state? The provided the name of the entity, NAIC Company Code, and state to exist as a result of the merger or consolidation. The provided the name of the entity, NAIC Company Code, and state to exist as a result of the merger or consolidation. The provided the name of the entity, NAIC Company Code, and state to exist as a result of the merger or consolidation.	since the prior quages. d group?	articles of incorporation, g of two or more affiliated uarter end? SEC for the entity/group overed by this statement e two letter state abbrev	d persons, one or m	ore of which	Yes [Yes [Yes [] No) [X]
reportin 2.2 If yes, 3.1 Is the resistant in figure, 3.2 Have the resistant in figure, 3.3 If the resistant in figure, 3.4 Is the resistant in figure, 4.1 Has the resistant in figure, 4.2 If yes, 5. If the resistant in fact, 1.4 If yes, 6.1 State at date side reperture date). 6.3 State at the reperture date). 6.4 By what	eporting entity? eporting entity a member of an Insurance Holding Company S surer? complete Schedule Y, Parts 1 and 1A. here been any substantial changes in the organizational chart response to 3.2 is yes, provide a brief description of those chan eporting entity publicly traded or a member of a publicly traded esponse to 3.4 is yes, provide the CIK (Central Index Key) code reporting entity been a party to a merger or consolidation dur complete and file the merger history data file with the NAIC. Provide the name of the entity, NAIC Company Code, and state to exist as a result of the merger or consolidation. 1 Name of Entity eporting entity is subject to a management agreement, includir or similar agreement, have there been any significant change	since the prior quages. Id group?	g of two or more affiliated uarter end? SEC for the entity/group overed by this statement etwo letter state abbrevers and the state abbrevers are state abbrevers and the state abbrevers and the state abbrevers are state abbrevers and the state abbrevers and the state abbrevers are state abbrevers are state abbrevers and the state abbrevers are state abbrevers and the state abbrevers are state abbrevers are state abbrevers and the state abbrevers are state abbrevers and the state abbrevers are state abbrevers are state abbrevers are state a	d persons, one or m	ore of which	Yes [Yes [Yes [X] No) [X]
3.1 Is the ris an ir If yes, 3.2 Have to 3.3 If the research 3.4 Is the ris 3.5 If the research 4.1 Has the If yes, 4.2 If yes, 5. If the ris 6.1 State a the rep date) 6.4 By wha	eporting entity a member of an Insurance Holding Company S surer? complete Schedule Y, Parts 1 and 1A. here been any substantial changes in the organizational chart esponse to 3.2 is yes, provide a brief description of those chan eporting entity publicly traded or a member of a publicly traded esponse to 3.4 is yes, provide the CIK (Central Index Key) code reporting entity been a party to a merger or consolidation dur complete and file the merger history data file with the NAIC. Provide the name of the entity, NAIC Company Code, and state to exist as a result of the merger or consolidation. 1 Name of Entity Paporting entity is subject to a management agreement, includir or similar agreement, have there been any significant change.	since the prior quages. Id group? Ide issued by the string the period content of domicile (use	uarter end? SEC for the entity/group overed by this statement etwo letter state abbreviate MAIC Company Code	d persons, one or m	ore of which	Yes [Yes [Yes [] No) [X]
is an in if yes, if the results of t	complete Schedule Y, Parts 1 and 1A. There been any substantial changes in the organizational chart approaches to 3.2 is yes, provide a brief description of those changes exponse to 3.2 is yes, provide a brief description of those changes exponse to 3.4 is yes, provide the CIK (Central Index Key) code are reporting entity been a party to a merger or consolidation dure complete and file the merger history data file with the NAIC. The provide the name of the entity, NAIC Company Code, and state to exist as a result of the merger or consolidation. 1 Name of Entity Reporting entity is subject to a management agreement, includir or similar agreement, have there been any significant change.	since the prior quages. If group?	uarter end? SEC for the entity/group overed by this statement etwo letter state abbrevers and the state abbrevers are state abbrevers and the state abbrevers are state abbrevers and the state abbrevers and the state abbrevers and the state abbrevers are state abbrevers are state abbrevers and the state abbrevers are state abbrevers and the state abbrevers are state abbrevers are state abbrevers and the state abbrevers are state abbrevers and the state abbrevers are state abbrev	t?viation) for any entity	that has	Yes [] No) [X]
3.3 If the re 3.4 Is the re 3.5 If the re 4.1 Has the figes, ceased 5. If the re 6.1 State a date si 6.3 State a the reg date). 6.4 By wha	esponse to 3.2 is yes, provide a brief description of those chan eporting entity publicly traded or a member of a publicly traded esponse to 3.4 is yes, provide the CIK (Central Index Key) code reporting entity been a party to a merger or consolidation durcomplete and file the merger history data file with the NAIC. Provide the name of the entity, NAIC Company Code, and state to exist as a result of the merger or consolidation. 1 Name of Entity eporting entity is subject to a management agreement, includir or similar agreement, have there been any significant change	d group?ele issued by the string the period co	SEC for the entity/group overed by this statement e two letter state abbrevenue.	t?viation) for any entity	v that has	Yes [] No) [X]
3.4 Is the r 3.5 If the r 4.1 Has the figure, ceased 5. If the r in-fact, figure, 6.1 State a date si 6.3 State a the reg date). 6.4 By wha	eporting entity publicly traded or a member of a publicly traded esponse to 3.4 is yes, provide the CIK (Central Index Key) code reporting entity been a party to a merger or consolidation dure complete and file the merger history data file with the NAIC. Provide the name of the entity, NAIC Company Code, and state to exist as a result of the merger or consolidation. 1 Name of Entity Paporting entity is subject to a management agreement, includir or similar agreement, have there been any significant change	d group?	SEC for the entity/group overed by this statement e two letter state abbrev 2 NAIC Company Code	t?viation) for any entity	v that has			
 3.5 If the residue of the r	esponse to 3.4 is yes, provide the CIK (Central Index Key) code reporting entity been a party to a merger or consolidation dur complete and file the merger history data file with the NAIC. Provide the name of the entity, NAIC Company Code, and state to exist as a result of the merger or consolidation. 1 Name of Entity exporting entity is subject to a management agreement, includir or similar agreement, have there been any significant change	le issued by the string the period content of domicile (us	SEC for the entity/group overed by this statement e two letter state abbrev 2 NAIC Company Code	t?viation) for any entity	v that has			
 4.1 Has the If yes, or ceased 5. If the rein-fact, or in-fact, or in-fac	e reporting entity been a party to a merger or consolidation dur complete and file the merger history data file with the NAIC. provide the name of the entity, NAIC Company Code, and state to exist as a result of the merger or consolidation. 1 Name of Entity eporting entity is subject to a management agreement, includir or similar agreement, have there been any significant change	ring the period co	e two letter state abbrev	t?viation) for any entity	v that has			
f yes, ceased 5. If the rein-fact, If yes, 6.1 State a date sl 6.3 State a the rep date). 6.4 By wha	complete and file the merger history data file with the NAIC. crovide the name of the entity, NAIC Company Code, and state to exist as a result of the merger or consolidation. 1 Name of Entity exporting entity is subject to a management agreement, includir or similar agreement, have there been any significant change.	e of domicile (us	e two letter state abbrev 2 NAIC Company Code	viation) for any entity	that has	Yes [] No) [X]
5. If the rein-fact, If yes, 6.1 State a 6.2 State t date si 6.3 State a the rep date). 6.4 By wha	1 Name of Entity porting entity is subject to a management agreement, includir or similar agreement, have there been any significant change.	ng third-party adr	2 NAIC Company Code	3				
in-fact, If yes, in fact, If yes, I	Name of Entity eporting entity is subject to a management agreement, includir or similar agreement, have there been any significant change	ng third-party adr	NAIC Company Code		e			
in-fact, If yes, in fact, If yes, I	or similar agreement, have there been any significant change	ng third-party adr	ministrator(s) managing					
6.2 State t date sl6.3 State a the rep date).6.4 By what	attach an explanation.	s regarding the t	erms of the agreement	g general agent(s), a or principals involve	ttorney- d? Yes] No	[X]	N/A [
6.3 State a the rep date).	as of what date the latest financial examination of the reporting	entity was made	e or is being made		<u>-</u>	1:	2/30/202	20
the rep date).	he as of date that the latest financial examination report becan nould be the date of the examined balance sheet and not the d							
	as of what date the latest financial examination report became orting entity. This is the release date or completion date of the	e examination rep	port and not the date of	the examination (ba	lance sheet			
Mcihia	at department or departments?							
6.5 Have a	an Department of Insurance and Financial Services ill financial statement adjustments within the latest financial ex ent filed with Departments?] No	[]	N/A [X
6.6 Have a	ill of the recommendations within the latest financial examination	ion report been c	complied with?		Yes] No	[]	N/A [X
	is reporting entity had any Certificates of Authority, licenses or d by any governmental entity during the reporting period?					Yes [] No	[X]
7.2 If yes,	give full information:							
8.1 Is the o	company a subsidiary of a bank holding company regulated by	the Federal Res	serve Board?			Yes [] No	[X]
8.2 If respo	onse to 8.1 is yes, please identify the name of the bank holding	g company.						
8.3 Is the o	company affiliated with one or more banks, thrifts or securities	firms?				Yes [] No	[X]
regulat	onse to 8.3 is yes, please provide below the names and locatic ory services agency [i.e. the Federal Reserve Board (FRB), thoce Corporation (FDIC) and the Securities Exchange Commiss	e Office of the C	omptroller of the Curren	ncy (OCC), the Fede	ral Deposit			
	1 Affiliate Name	L	2 Location (City, State)	3 FRB	4 5 OCC FDI	C SEC	;	

GENERAL INTERROGATORIES

9.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?	sonal and professiona		Yes [X] No	[]
				\/ F		. v 1
9.2 9.21	Has the code of ethics for senior managers been amended?			Yes [] No	[X]
9.3 9.31	Have any provisions of the code of ethics been waived for any of the specified officers?			Yes [] No	[X]
	FINANCIAL					
10.1 10.2	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement If yes, indicate any amounts receivable from parent included in the Page 2 amount:					
	INVESTMENT					
	Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or oth use by another person? (Exclude securities under securities lending agreements.) If yes, give full and complete information relating thereto:			Yes [] No	[X]
12.	Amount of real estate and mortgages held in other invested assets in Schedule BA:		\$			0
13.	Amount of real estate and mortgages held in short-term investments:					
14.1 14.2	Does the reporting entity have any investments in parent, subsidiaries and affiliates?			Yes [] No	[X]
		1 Prior Year-End Book/Adjusted Carrying Value		Вс	ok/Ad	Quarter justed Value
	Bonds					
	Preferred Stock					
	Common Stock					
	Short-Term Investments					
	Mortgage Loans on Real Estate					
	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)					0
	Total Investment in Parent included in Lines 14.21 to 14.26 above					
15.1	Has the reporting entity entered into any hedging transactions reported on Schedule DB?			Yes [1 No	[X]
15.2	If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement.		Yes [] No []	N/A [X]
16.	For the reporting entity's security lending program, state the amount of the following as of the current statement dat	e:				
	16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2					
	16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, F	arts 1 and 2	\$			0
	16.3 Total payable for securities landing reported on the liability page					0

GENERAL INTERROGATORIES

17. 17.1	offices, vaults or safety custodial agreement w Outsourcing of Critical	y deposit boxes, vith a qualified ba Functions, Cust	- Special Deposits, real estate, m were all stocks, bonds and other sank or trust company in accordant todial or Safekeeping Agreements e requirements of the NAIC Finance	securities, owner ce with Section of the NAIC Fi	ed throughous 1, III - General Cornancial Cor	out the current year heral Examination Condition Examiners Ha	eld pursuant to a nsiderations, F. andbook?	Yes	s [X]	No []
		1				2			ı		
	TCF Bank, now part o	Name of Cu f Huntington Na	stodian(s) tional Bank	2301 Big Bea	ver Rd., S	Custodian Addre	ss higan		ī		
	, . ,						J				
17.2	For all agreements that location and a complete		with the requirements of the NAIC	Financial Con-	dition Exam	niners Handbook, pro	ovide the name,				
	1 Name(s)	2 Location(s)			3 Complete Explan	ation(s)		1		
17.3 17.4	Have there been any of lf yes, give full information	•	ng name changes, in the custodiar reto:	n(s) identified in	17.1 durin	g the current quarter	?	Yes	[X]	No []
	1 Old Custo	odian	2 New Custodian	Date	3 of Change		4 Reason		1		
	TCF Bank		TCF Bank part of Huntington National Bank	06,	/09/2021	in turn is now corporate famil	was acquired by TCF, wh part of the Huntington y. The Plan exects the ave no efffect on the s provided.	Bank	1		
17.5	make investment decis	sions on behalf	investment advisors, investment n of the reporting entity. For assets t stment accounts"; "handle secu	that are manage urities"]	ed internally	including individuals by employees of the	that have the authority to e reporting entity, note as) S			
		Name of Fir	1 m or Individual	2 Affilia							
					l l						
					l l						
			ted in the table for Question 17.5, the more than 10% of the reporting					Yes	s [X]	No []
	17.5098 For firms/indiv total assets u	viduals unaffiliat nder manageme	ed with the reporting entity (i.e. deen aggregate to more than 50% of	signated with a f the reporting e	"U") listed entity's inves	in the table for Ques	tion 17.5, does the	Yes	s [X]	No []
17.6	table below.	viduals listed in t	the table for 17.5 with an affiliation	code of "A" (af	filiated) or "			he			_
	1		2			3	4		Invest Manag	tment ement	
	Central Registration Depository Number		Name of Firm or Individual			tity Identifier (LEI)	Registered With		Agree (IMA)		
			Purposes and Procedures Manual								
19.	a. Documentation security is not a b. Issuer or obligo c. The insurer has	necessary to pe available. r is current on al an actual exped	reporting entity is certifying the foll ermit a full credit analysis of the se Il contracted interest and principal station of ultimate payment of all co d 5GI securities?	curity does not payments.	exist or an	NAIC CRP credit rat	ing for an FE or PL	Yes	s []	No [Х]
20.	a. The security was b. The reporting er c. The NAIC Desig on a current priv d. The reporting er	s purchased price tity is holding can ation was derivate letter rating tity is not permite.	e reporting entity is certifying the for to January 1, 2018. In the January 1, 2018. In the Indian specific that is a signed to the Indian series of the I	C Designation real by an NAIC Clor examination e PL security w	eported for RP in its leg by state ins ith the SVC	the security. gal capacity as a NR surance regulators.).	SRO which is shown	Yes	s []	No [X]
21.	FE fund: a. The shares were b. The reporting er c. The security had January 1, 2019 d. The fund only or e. The current repc in its legal capac f. The public credit	e purchased prior titly is holding ca I a public credit if predominantly I orted NAIC Designity as an NRSR rating(s) with ar	n-registered private fund, the report to January 1, 2019. Apital commensurate with the NAIC rating(s) with annual surveillance and some some some some some some some some	C Designation rassigned by an ic credit rating(s	eported for NAIC CRP s) with annu	the security. in its legal capacity ual surveillance assig	as an NRSRO prior to	Yes	. [1	No [γ 1
	ao alo reporting entit	, accignica i L ll	2 Conocado Di Chon registerea priv	are range that t	.cpiicu Wi	20010 0110110	•	168	ι 1	INO [v 1

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:

	1.1 A&H loss percent	1.0 %
	1.2 A&H cost containment percent	0.0 %
	1.3 A&H expense percent excluding cost containment expenses	1.0 %
2.1	Do you act as a custodian for health savings accounts?	Yes [] No [X]
2.2	If yes, please provide the amount of custodial funds held as of the reporting date	
2.3	Do you act as an administrator for health savings accounts?	Yes [] No [X]
2.4	If yes, please provide the balance of the funds administered as of the reporting date	
3.	Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?	Yes [] No [X]
3.1	If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?	Yes [] No [X]

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

NAIC Type of Type of Type of Type of Type of Reinsurer Certified Date of Certified D	Showing All New Reinsurance Treaties - Current Year to Date									
Name of Rensure Name of Re		2	3					8	Certified	Effective Date of
1908 1979/200 Parker Exercise Instance Croppy E 1921 SE Inhabities 1	NAIC Company Code	ID Number	Effective Date	Name of Reinsurer	Domiciliary	Type of Reinsurance Ceded	Type of Business Ceded	Type of Reinsurer	Reinsurer Rating (1 through 6)	Certified Reinsurer Rating
	11835	04-1590940	01/01/2021	Partner RE American Insurance Company	DE	ASL/I	SLEL	Authorized	(Tunough o)	rating
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SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

		1	2 1	2	4		rect Business C	,	0		10
	States, etc.	Active Status (a)	Accident and Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 CHIP Title XXI	6 Federal Employees Health Benefits Program Premiums	7 Life and Annuity Premiums & Other Considerations	8 Property/ Casualty Premiums	9 Total Columns 2 Through 8	Deposit-Type
1.	Alabama AL	N								0	
2.	Alaska AK	N								0	
3.	Arizona AZ	N								0	
4.	Arkansas AR	N								0	
5.	California CA	N								0	
6.	Colorado CO	N								0	
7.	Connecticut CT	N								0	
8.	Delaware DE	N								0	
9.	District of Columbia . DC	N								0	
10.	Florida FL	N								0	
11.	Georgia GA	N								0	
12.	Hawaii HI	N								0	
13.	Idaho ID	N								0	
14.	Illinois IL	N								0	
15.	IndianaIN	N								0	
16.	lowa IA	N								0	
17.	Kansas KS	N	ļ ļ							0	
18.	Kentucky KY	N								0	
19.	Louisiana LA	N								0	
20.	Maine ME	N	ļ							0	
21.	Maryland MD	N								0	
22.	Massachusetts MA	N	ļ ļ							0	
23.	Michigan MI	L		3,903,894						3,903,894	
24.	Minnesota MN	N								0	
25.	Mississippi MS	N	ļ ļ							0	
26.	Missouri MO	N								0	
27.	Montana MT	N								0	
28.	Nebraska NE	N								0	
29.	Nevada NV	N								0	
	New Hampshire NH	N								0	
	New Jersey NJ	N								0	
32.	New Mexico NM	N								0	
33.	New York NY	N								0	
34.	North Carolina NC	N								0	
35.	North Dakota ND	N								0	
36.	Ohio OH	N								0	
37.	Oklahoma OK	N								0	
38.	Oregon OR	N								0	
39.	Pennsylvania PA	N								0	
40.	Rhode Island RI	N								0	
41.	South Carolina SC	N								0	
42.	South Dakota SD	N								0	
43.	Tennessee TN	N								0	
44.	Texas TX	N								0	
45.	Utah UT	N								0	
46.	Vermont VT	N	ļ							0	
47.	Virginia VA	N	ļ l							0	
48.	Washington WA	N								0	
49.	West Virginia WV	N	ļ l					[0	
50.	Wisconsin WI	N	ļ l					[0	
51.	Wyoming WY	N								0	
52.	American Samoa AS	N	ļ ļ				ļ	ļ	ļ	0	
53.	Guam GU	N								0	
54.	Puerto Rico PR	N	ļ							0	
55.	U.S. Virgin Islands VI	N	ļ							0	
56.	Northern Mariana									ĺ	
	Islands MP	N	-							0	
	Canada CAN	N								J0	
58.	Aggregate Other	XXX	0	0	0	0	0	0	^	^	
59.	Aliens OT Subtotal	XXX	0	3,903,894	0	0	0	0	0 0	0	
		XXX	†································	o, 9 00, 894	U	U	ļ ^U	ļ	0	0, 500, 894	ļ
60.	Reporting Entity Contributions for Employee										
	Benefit Plans	XXX	<u> </u>							0	
61.	Totals (Direct Business)	XXX	0	3,903,894	0	0	0	0	0	3,903,894	C
	DETAILS OF WRITE-INS			, , - + -		,				,. ,,	
8001.		XXX]1				_			ļ	
58002.		XXX	ļI								
8003.		XXX	ļI								
58998.	Summary of remaining										
	write-ins for Line 58 from	,	_			_	_		_	_	_
20000	overflow page	XXX	0	0	0	0	0	0	0	0	ļ0
0999.	Totals (Lines 58001 through 58003 plus 58998)(Line 58										
	above)	XXX	0	0	0	0	0	0	0	0	0
	e Status Counts:	,,,,,	•	٧	J	J	. ,	J			

Active Status Counts:	
L - Licensed or Chartered - Licensed Insurance carrier or domiciled RRG1	R - Registered - Non-domiciled RRGs
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state0	Q - Qualified - Qualified or accredited reinsurer(
N - None of the above - Not allowed to write business in the state	

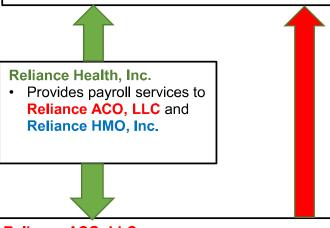
5

Reliance HMO, Inc. and Related Entities

(Ownership as of September 30, 2021)

Reliance HMO, Inc.

- Nazmul Haque, MD Chief Executive Officer (Owns 6.9%)
- Gene Farber President
 - Gregory Berger, MD Chief Medical Officer
 - Jacob Nysson Chief Operating Officer
 - Jeff Neuburger Financial Principal



Reliance ACO, LLC

- Largest shareholder of Reliance HMO, Inc. (Owns 23.4%)
- Nazmul Haque, MD Chief Executive Officer (Owns 16.7% of Reliance ACO, LLC)

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STATEMENT AS OF SEPTEMBER 30, 2021 OF THE Reliance HMO Inc

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Туре	If			
											of Control	Control			
											(Ownership,	is		Is an	
						Name of Securities			Relation-					SCA	
								D			Board,	Owner-			
						Exchange		Domi-			Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary			Attorney-in-Fact,	Provide		Re-	
Group Code		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-		Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	Directly Controlled by (Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	*
							Reliance ACO, LLC	MI	UDP	Reliance ACO, LLC Board of Directors	Board of Directors		Nazmul Haque, MD	N	
							Reliance HMO, Inc.	MI	IA	Reliance HMO, Inc. Board of Directors	Board of Directors		Nazmul Haque, MD	N	
									1						
									1						
									· · · · · · · · · · · · · · · · · · ·						
									1						
		1	1	1	1	1	1	•	1	1	i e	1		1	1

Asterisk	Explanation

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

		_	Response
1.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this state	itement?	NO
	Explanation:		
1.	Not reauired for Medicare Advantage Plans		
1.	Bar Code: Medicare Part D Coverage Supplement [Document Identifier 365]		

STATEMENT AS OF SEPTEMBER 30, 2021 OF THE Reliance HMO Inc OVERFLOW PAGE FOR WRITE-INS

NONE

SCHEDULE A - VERIFICATION

Real Estate

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Current year change in encumbrances		
4.	Total gain (loss) on disposals		
5.	Deduct amounts received on disposals		
6.	Total foreign exchange change in book/adjusted rying		
7.	Deduct current year's other than temporary impailment recognized		
8.	Deduct current year's depreciation		
9.	Pook/adjusted corning value at the end of current period (Lines 1+2+2+4 5+6 7.9)		
10.	Deduct total nonadmitted amounts		
11.	Statement value at end of current period (Line 9 minus Line 10)		

SCHEDULE B - VERIFICATION

Mortgage Loans

	Mortgage Loans	1	2
		ı	Prior Year Ended
		Year to Date	December 31
			December 31
1.	Book value/recorded investment excluding accrued interest, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and mortgage in lest parallel amitme lesses		
9.	Total foreign exchange change in book value/recorded inversion texts.		
10.	Deduct current year's other than temporary impairment recognized		
11.	Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12.	Total valuation allowance		
13.	Subtotal (Line 11 plus Line 12)		
14.	Deduct total nonadmitted amounts		
15.	Statement value at end of current period (Line 13 minus Line 14)		

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	•	1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and depreciation		
9.	Total foreign exchange change in book/adjusted carrying value		
10.	Deduct current year's other than temporary impairment recognized		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)		

SCHEDULE D - VERIFICATION

Bonds and Stocks

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	1,463,804	822,522
2.	Cost of bonds and stocks acquired		1,361,508
3.	Accrual of discount		0
4.	Unrealized valuation increase (decrease)		(20,880)
5.	Total gain (loss) on disposals		(84)
6.	Deduct consideration for bonds and stocks disposed of	1,463,804	690,000
7.	Deduct amortization of premium		9,262
8.	Total foreign exchange change in book/adjusted carrying value		0
9.	Deduct current year's other than temporary impairment recognized		0
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	0	1,463,804
12.	Deduct total nonadmitted amounts		0
13.	Statement value at end of current period (Line 11 minus Line 12)	0	1,463,804

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity

During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation Book/Adjusted Carrying Value Book/Adjusted Carrying Value Book/Adjusted Book/Adjusted Book/Adjusted Acquisitions Dispositions Non-Trading Activity Carrying Value Carrying Value Carrying Value Beginning During During During End of End of End of December 31 NAIC Designation of Current Quarter Current Quarter Current Quarter Current Quarter First Quarter Second Quarter Third Quarter Prior Year

NAIC Designation	of Current Quarter	Current Quarter	Current Quarter	Current Quarter	First Quarter	Second Quarter	Third Quarter	Prior Year
BONDS								
1. NAIC 1 (a)	0		1,463,804		0	1,463,804	0	1,463,804
4. NAIC 4 (a)					0	0	0	0
5. NAIC 5 (a)					0	0	0	0
6. NAIC 6 (a)					0	0	0	0
7. Total Bonds	1,463,804	0	1,463,804	0	0	1,463,804	0	1,463,804
PREFERRED STOCK 8. NAIC 1	0				0	0	0	0
9. NAIC 2	0				0	0	0	0
10. NAIC 3	0				0	0	0	0
11. NAIC 4	0				0	0	0	0
12. NAIC 5	0				0	0	0	0
13. NAIC 6	0				0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	1,463,804	0	1,463,804	0	0	1,463,804	0	1,463,804

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:

NAIC 1 \$, NAIC 2 \$, NAIC 3 \$, NAIC 4 \$, NAIC 5 \$, NAIC 6 \$...

Schedule DA - Part 1 - Short-Term Investments

NONE

Schedule DA - Verification - Short-Term Investments

NONE

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards

NONE

Schedule DB - Part B - Verification - Futures Contracts

NONE

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open **NONE**

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open **NONE**

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of Derivatives

NONE

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

	Transaction American	1	2
		'	2
			Prior Year Ended
		Year To Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year	62,334	594,584
2.	Cost of cash equivalents acquired	2,736,510	0
3.	Accrual of discount		0
4.	Unrealized valuation increase (decrease)		0
5.	Total gain (loss) on disposals		0
6.	Deduct consideration received on disposals		532,250
7.	Deduct amortization of premium		0
8.	Total foreign exchange change in book/adjusted carrying value		0
9.	Deduct current year's other than temporary impairment recognized		0
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	2,798,844	62,334
11.	Deduct total nonadmitted amounts		0
12.	Statement value at end of current period (Line 10 minus Line 11)	2,798,844	62,334

Schedule A - Part 2 - Real Estate Acquired and Additions Made **NONE**

Schedule A - Part 3 - Real Estate Disposed **N O N E**

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made NONE

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid

NONE

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made NONE

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid **NONE**

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

			1	Long-Term Bonds and Otock Acquired Buring the Ourient Quarte		-	•	_	1 40
1	2	3	4	5	6	/	8	9	10
									NAIC
									Designation,
									NAIC
									Designation
									Modifier
									and
									SVO
					Number of			Paid for Accrued	Admini-
CUSIP			Date		Shares of			Interest and	strative
Identification	Description	Foreign	Acquired	Name of Vendor	Stock	Actual Cost	Par Value	Dividends	Symbol
	City of Philadelphia, Pennsylvania	roleigii	03/09/2021	Chemical Bank	Stock	48,841	45.000		1 1 A
45506D-6G-5	Indiana State Financial Authority		03/09/2021	Chemical Bank		48,841	45,000		11.A 11.A
	City of Dallas-Fort Worth, Texas		03/09/2021	Chemical Bank		15,663	15,000		1.A
	City of Lakeworth. Florida		03/09/2021	Chemical Bank		10,104	10,000		3 1.A
	Cuyahoga County, Ohio		03/09/2021	Chemical Bank		21,610	20,000		1.A
	City of Whitestown, Indiana		03/09/2021	Chemical Bank					5 1.A
	South Central Connecticut		03/09/2021	Chemical Bank		10,359	10,000		2 1.A
	Missouri State Housing Authority		03/09/2021	Chemical Bank		10,773	10,000		2 1.A
880461-RV-2	Tennessee Housing Authority		03/09/2021	Chemical Bank		10,590	10,000		1.A
	Florida State Housing Authority		03/09/2021	Chemical Bank		21,307	20,000		1 1.A
	Oregon State Housing Authority		03/09/2021	Chemical Bank		31,728	30,000	142	2 1.A
	Derrry Township, Pennsylvania		03/19/2021	Chemical Bank		61,084		0	. 1.A
	City of Norway, Michigan		05/27/2021	Chemical Bank Chemical Bank		25,726	25,000		5 1.A 1.A
	State of Florida Housing Authority		05/27/2021	Chemical Bank		15,58126,130	25.000) 1.A 3 1.A
	State of Florida Municipal Loan		05/27/2021	Chemical Bank		21,053	20,000		5 1.A
	City of Riverdale Dunes, Colorado		05/27/2021	Chemical Bank		21,082	20,000		1.4
	otal - Bonds - U.S. States. Territories and Possessions			OHOMITOUT DUM		394.317	375.000	2.029	
	I - Bonds - Part 3					394.317	375,000	2,029	_
	I - Bonds - Part 5					XXX	XXX	XXX	XXX
8399999. Total						394.317	375.000	2,029	
	I - Preferred Stocks - Part 3					0.54,017	XXX	2,029	XXX
	I - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX
	I - Preferred Stocks					7000	XXX	7000	XXX
	I - Common Stocks - Part 3					0	XXX	0	XXX
	I - Common Stocks - Part 5					XXX	XXX	XXX	XXX
	I - Common Stocks					1000	XXX	7000	XXX
	I - Preferred and Common Stocks					0	XXX	0	XXX
9999999 - Tota						394.317	XXX	2,029	
1100000 1000						30.,011	,,,,	2,020	

SCHEDULE D - PART 4

				Show All Lo	ng-Term Bo	onds and Stock	k Sold, Red	eemed or C	Otherwise I	Disposed o	of During t	he Current	Quarter							
1 2	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21	22			
					ļ	1		ŀ	11	12	13	14	15						1	NAIC
						i		·				!	,						i	Desig-
						i		·				!	,						i	nation,
					1	i		•											1	NAIC
						i						Total	Total						i	Desig-
					1	i		•			0		Total					Dond	1	
					1	i		•			Current	Change in	Foreign	, '				Bond	1	nation
		1			l l	í l		ľ			Year's	Book/	Exchange	Book/				Interest/	1	Modifie
					1	i		Prior Year		Current	Other Than	n Adjusted	Change in	Adjusted	Foreign			Stock	Stated	and
					1	i		Book/	Unrealized	Year's	Temporary	Carrying	Book	Carrying	Exchange	Realized		Dividends	Con-	SVO
CUSIP				Number of	1	i		Adjusted	Valuation	(Amor-	Impairment		/Adjusted	Value at	Gain	Gain	Total Gain	Received	tractual	Admini-
Ident-	For-	Disposal	Name	Shares of	Consid-	i	Actual	Carrying	Increase/	tization)/	Recog-	(11 + 12 -	Carrying	Disposal	(Loss) on			During	Maturity	strative
ification Description	eign		of Purchaser	Stock	eration	Par Value	Cost	Value	(Decrease)	Accretion		13)	Value	Date	Disposal		Disposal	Year	Date	Symbol
	cigii	01/15/2021		Otock		150,000	150,377	150,377				13)	value	150,000	Disposai	Disposai	Disposai		02/01/2821	1 /
912828-6D-7 United States Treasury Notes 3135G0-U2-7 Federal National Mortgage Association		02/16/2021	Chemical Bank		150,000	100,000	101,255	101,255		(337)				100,000				1,875 665	04/01/1321	
31422B-3D-0 Federal Agricultural Mortgage Corporation		05/17/2021	. Chemical Bank		48,770	50,000	49,687	49,687	(313)	33		(280)		49,720				97	11/20/2030	
3133EL-QR-8 Federal Farm Credit Bank		05/17/2021	. Chemical Bank		51,275	50,000	52,252	52,252	2,251	(259)		1,992		51,992	0	0		202	03/04/2027	1 1
3130AJ-4B-2 Federal Home Loan Bank			. Chemical Bank		93,609	90,000	94,579	94,579	4,579	(259)		3,532	n	93,532	n	n	n	228	03/04/2027	1 A
912828-ZE-3 United States Treasury Notes			Chemical Bank		49,707	50,000	50,468	50,468	468	(1,047)		355		50,355	n	n	n	136	03/31/2027	1 A
912828-ZC-7 United States Treasury Notes			. Chemical Bank		102,484	100,000	103,680	103,680	3,680	(1,263)		2,417	n	102,417	n	n	n	380	02/28/2025	1.A
912828-YZ-7 United States Treasury Notes			. Chemical Bank		50.326	50,000	50,221	50,221	221	(219)		2	n	50.002	n	n	n	(23)	12/31/2021	1 A
912828-YY-0 United States Treasury Notes		08/06/2021	. Chemical Bank		83.694	80.000	81,278		1,278	(489)		789	0		0	0	0	(39)	12/31/2021	1.A
0599999. Subtotal - Bonds - U.S. Governments					729,865	720,000	733,797	733,797	13,756	(4,949)				728,807	0		0	3,521	XXX	XXX
895723-AL-8 Tri Township Consolidated, Michigan		08/06/2021	Chemical Bank	I	10,000	10,000	10,286	10,286	286	(4,343)		0,007	0	10,000	1 0	1 0	1 0	5	02/15/2021	
		08/06/2021	Chemical Bank		50,000	50,000	51,227	51,227	1,227	(1,227)		0	0	50,000	0	0	0		1	
442435-4X-8 City of Houston, Texas - Utilities		08/06/2021	Chemical Bank		25,000	25,000	25,440	25,440	440	(440)		0	0	25,000	0	0	0		1	
88213A-JY-2 Texas A & M University		08/06/2021	Chemical Bank		30,000	30,000	30 , 192	30, 192	192	(192)		0	0	30,000	0	0	0		1	
155048-BX-8 Central Puget Sound, Washington		08/06/2021	Chemical Bank		20,897	20,000	22,000	22,000	2,000	(1,074)		926	0	20,926	0	0	0		L	
232287-CR-1		08/06/2021	Chemical Bank		21,617	20,000	21,610	21,610	1,610	(244)	0	1,366	0	21,366	0	0	0		L	
235036-4M-9 City of Dallas - Ft. Worth Texas		08/06/2021	. Chemical Bank		15,731	15,000	15,663	15,663	663	(94)		569	0	15,569	0	0	0		L	
250063-RS-5 Derby Township, PA		08/06/2021	. CHemical Bank		60,288	60,000	61,084	61,084	1,084	(96)		988	0	60,988	0	0	0	(130)	01/15/2021	1.A
252248-KA-6 City of Dexter, Michigan		08/06/2021	. Chemical Bank		20,780	20,000	20,061	20,061	61	(27)	0	34	0	20,034	0	0	0	5	02/15/2021	1.A
26678P-DR-8 City of Durham, North Carolina		08/06/2021	Chemical Bank		25,576	25,000	25,471	25,471	471	(340)	0	131	0	25, 131	0	0	0	268	05/15/2021	1.A
34074M-PW-5 State of Florida Housing Finance Authority		08/06/2021	. Chemical Bank		20,968	20,000	21,308	21,308	1,308	(180)	0	1, 128	0	21, 128	0	0	0	226	05/15/2021	1.A
34074M-SW-2 State of Florida, Housing Authority		08/06/2021	. Chemical Bank		15,318	15,000	15,581	15,581	581	(39)		542	0	15,542	0	0	0	485	02/01/2024	1.A
34282C-KY-6 State of Florida, Municipal Loan		08/02/2021	. Chemical Bank		21,088	20,000	21,063	21,063	1,053	(82)		971	0	20,971	0	0	0	243	07/01/2026	
45505T-GJ-4 State of Indiana Housing Authority		08/06/2021	. Chemical Bank		78,263	75,000	77,562	77,562	2,562	(821)		1,741	0	76,741	0	0	0	18	11/01/2026	
45506F-6G-5 Indiana State Finance Authority		08/06/2021	. Chemical Bank		10,672	10,000	10,588	10,588	588	(79)	0	509	0	10,509	0	0	0	443	12/15/2029	
462467-ZQ-7 State of Iowa Financing Authority		08/06/2021	. Chemical Bank		51,215	50,000	49,384	49,384	(616)	126	0	(490)	0	49,510	0	0	0	496	05/01/2025	
511355-AT-6 City of Lake Worth, FL		08/06/2021	. Chemical Bank		10,218	10,000	10 , 105	10 , 105	104	(16)		88	0	10,088	0	0	0	223	10/01/2022	
516228-RN-5 L'Anse Creuse Public School System		08/06/2021	. Chemical Bank		40,620	40,000	40,276	40,276	276	(242)		34	0	40,034	0	0	0	225	01/01/2027	
59447P-DB-4 State of Michigan Financing Authority	.	08/06/2021	. Chemical Bank	ļ	25,332	25,000	26,032	26,032	332	(267)		65	ļ0 l	25,065	ļ	0	ļ0 l	260	07/01/2026	
594610-7Z-4 State of Michigan		08/06/2021	. Chemical Bank		66,540	65,000	66,664	66,664	1,664	(897)		767	0	65,767	0	0	L0 1	80	10/01/2025	
594654-KA-2 State of Michigan Housing Authority		08/06/2021	. Chemical Bank		30,861	30,000	30,246	30,246	861	0		861	0	30,861	ļ0	0	0 I	105	07/01/2025	
59465M-7Z-4 State of Michigan Housing Authority			. Chemical Bank		26,030	25,000	26,130	26,130	1, 130	(72)		1,058	0 I	26,058	łō	0	F0	943	03/01/2027	
60637B-QT-O State of Missouri Housing Development			. Chemical Bank	 	10,676	10,000	10,773	10,773	773	(93)		680	ļū ļ	10,680	ļ	0	łō	600 67	07/01/2028	
610628-B8-1 Monroe County, Michigan			. Chemical Bank		26,795	25,000	26,771	26,771	1,771	(748)		1,023	0	26,023	J0	0	0		07/01/2026	
625831-CV-2 City of Muncie, Indiana Econ. Development		08/06/2021	. Chemical Bank		10,000 51.885	10,000		10,217	217	(217)		0	0	10,000	Jō	0	ļ	818 . 474	05/01/2022	
647201-GL-O State of New Mexico			. Chemical Bank			50,000	51,417	51,417	1,417	(415)		1,002	0	51,002	ļ	0	0		01/11/2022	
667224-DN-6 Northville Charter Township, Michigan	-	08/06/2021	. Chemical Bank	 	26,387	30,000	33 , 120	33, 120	3, 120	(2, 113)		1,007		31,007	ļ	0	ļ	1,626	05/15/2023	
66928H-CX-8 City of Norway, MI	-	08/06/2021	. Chemical Bank		25,485	25,000	25,726	25,726	726	(101)		625	0	25,625	l	0	0	431	12/14/2027	1.A
			. Chemical Bank		41,466	45,000		45,285	285	(69)		216		45,216 31,509	1	0		0	10/01/2026	
686087-VR-5 State of Oregon Housing Authority		08/06/2021	. Chemical Bank		48,013			31,728 48,841		(219)		1,509				0			11/01/2027	
72316W-C2-1 Pinellas County, Florida Housing Authority	-	08/06/2021	Chemical Bank	·	52, 170	55,000	56.539	56,539		(402)		1, 137		56.137		0	ļ	157	08/01/2023	1 1 1
768643-AK-4 City of Riverdale Dunes, CO		08/06/2021	. Chemical Bank		20,214	20,000	21,082	21,082	1,082	(402)		1, 137		21,015	n	n	n	430	01/01/2021	1 1 1
		08/06/2021	Chemical Bank		10.400	10.000	10.359	10,359	359	(53)		306	n	10.306	n	n	n	1.436	.04/01/2023	
880461-RV-2 State of Tennessee Housing Development		08/06/2021	Chemical Bank		10.641	10,000	10,590	10,590	591	(69)		522	0	10,522	0	0	0	120	11/01/2023	
958638-QK-7 Western Michigan University	I	08/06/2021	Chemical Bank	[42,796	40,000	40,785	40,785	785	(378)		407	0	40.407			[n		03/01/2027	
966100-DA-4 City of Whitestown, IN		08/06/2021	. Chemical Bank		30,381	30,000	32,098	32,098	2,098	(311)		1,787	0	31,787	0	0	0	306	07/01/2027	
1799999. Subtotal - Bonds - U.S. States, Territo	ries a		ions		1,115,877	1,095,000	1,133,304	1,133,304	38,209	(12,446)		25,763	0	1,120,763	0	0	0	11,977	XXX	XXX
8399997. Total - Bonds - Part 4					1,845,742	1,815,000	1,867,101	1,867,101	51,965	(17,395)				1,849,570	0			15,498	XXX	XXX
						XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX		XXX	XXX	XXX
I 8300008 Total - Ronde - Part 5																				
8399998. Total - Bonds - Part 5					XXX										XXX		XXX			_
8399998. Total - Bonds - Part 5 8399999. Total - Bonds 8999997. Total - Preferred Stocks - Part 4					1,845,742	1,815,000 XXX	1,867,101	1,867,101	51,965	(17,395)	0	34,570	0	1,849,570	0 0	0	0	15,498	XXX	XXX

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1	2	3	4	5	6	7	8	9	10	Ch	ange In Bo	ok/Adjusted	Carrying Va	lue	16	17	18	19	20	21	22
									1	11	12	13	14	15							NAIC
									1												Desig-
									I												nation,
									1												NAIC
									1				Total	Total							Desig-
									1			Current	Change in	Foreign					Bond		nation
									1			Year's	Book/	Exchange	Book/				Interest/		Modifier
									Prior Year		Current	Other Than	Adjusted	Change in	Adjusted	Foreign			Stock	Stated	and
									Book/	Unrealized	Year's	Temporary	Carrying	Book	Carrying	Exchange	Realized		Dividends	Con-	SVO
CUSIP					Number of				Adjusted	Valuation	(Amor-	Impairment	Value	/Adjusted	Value at	Gain	Gain	Total Gain	Received	tractual	Admini-
Ident-		For-		Name	Shares of	Consid-		Actual	Carrying	Increase/	tization)/	Recog-	(11 + 12 -	Carrying	Disposal	(Loss) on	(Loss) on	(Loss) on	During	Maturity	strative
ification	Description	eign	Date	of Purchaser	Stock	eration	Par Value	Cost	Value	(Decrease)	Accretion	nized	13)	Value	Date	Disposal	Disposal	Disposal	Year	Date	Symbol
8999998. Total	- Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8999999. Total	- Preferred Stocks					0	XXX	0	1 0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
9799997. Total	- Common Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
9799998. Total	- Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9799999. Total	- Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
9899999. Total	- Preferred and Common Stocks	3				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
9999999 - Tota	ıls				•	1,845,742	XXX	1,867,101	1,867,101	51,965	(17,395)	0	34,570	0	1,849,570	0	0	0	15,498	XXX	XXX

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open NONE

Schedule DB - Part B - Section 1 - Futures Contracts Open NONE

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made **NONE**

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open **N O N E**

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By **NONE**

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To NONE

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees

NONE

Schedule DL - Part 1 - Reinvested Collateral Assets Owned NONE

Schedule DL - Part 2 - Reinvested Collateral Assets Owned NONE

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1						ance at End of Eacuring Current Quart					
			Amount of Interest Received		6	7	8				
		Rate of	During Current	at Current							
Depository	Code	Interest	Quarter	Statement Date	First Month	Second Month	Third Month	*			
TCF / Huntington Bank											
(checking) Michigan		0.000	0	0	2,940,999	2,880,547	2,012,117	XXX			
0199998. Deposits in depositories that do not exceed the allowable limit in any one depository (See											
instructions) - Open Depositories	XXX	XXX						XXX			
0199999. Totals - Open Depositories	XXX	XXX	0	0	2,940,999	2,880,547	2,012,117	XXX			
0299998. Deposits in depositories that do not exceed the allowable limit in any one depository (See	V/V/	V///						VVV			
instructions) - Suspended Depositories	XXX	XXX		0	0	^		XXX			
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX			
0399999. Total Cash on Deposit	XXX	XXX	0	0	2,940,999	2,880,547	2,012,117	XXX			
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX				XXX			
					• • • • • • • • • • • • • • • • • • • •						
	· · · · · · · · · · · · · · · · · · ·										
					•						
	· · · · · · · · · · · · · · · · · · ·										
								·····			
0599999. Total - Cash	XXX	XXX	0	0	2,940,999	2,880,547	2,012,117	XXX			

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

Snow investments Owned and of Current Quarter				
1 2 3 4	5 6	7	8	9
		Book/Adjusted	Amount of Interest	Amount Received
	of Interest Maturity Date	Carrying Value	Due and Accrued	During Year
0599999. Total - U.S. Government Bonds		0	0	0
1099999. Total - All Other Government Bonds		0	0	0
1799999. Total - U.S. States, Territories and Possessions Bonds		0	0	0
2499999. Total - U.S. Political Subdivisions Bonds		0	0	0
3199999. Total - U.S. Special Revenues Bonds		0	0	0
3899999. Total - Industrial and Miscellaneous (Unaffiliated) Bonds		0	0	0
4899999. Total - Hybrid Securities		0	0	0
5599999. Total - Parent, Subsidiaries and Affiliates Bonds		0	0	0
6099999. Subtotal - SVO Identified Funds		0	0	0
6599999. Subtotal - Unaffiliated Bank Loans		0	0	0
7699999. Total - Issuer Obligations		0	0	0
7799999. Total - Residential Mortgage-Backed Securities		0	0	0
7899999. Total - Commercial Mortgage-Backed Securities		0	0	0
7999999. Total - Other Loan-Backed and Structured Securities		0	0	0
8099999. Total - SVO Identified Funds		0	0	0
8199999. Total - Affiliated Bank Loans		0	0	0
8299999. Total - Unaffiliated Bank Loans		0	0	0
8399999. Total Bonds		0	0	0
Federated Hermes Treasury Obl		1,550,322	0	12
8499999. Subtotal - Sweep Accounts		1,550,322	0	12
Morgan Stanley		1,248,522	0	2,548
8699999. Subtotal - All Other Money Market Mutual Funds		1,248,522	0	2,548
		2,798,844		2,560
9999999 - Total Cash Equivalents				